

Exhibit 46

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February 3, 2012

VIA EMAIL & FEDERAL EXPRESS

R. Jason D'Cruz, Esq.
Morris, Manning & Martin, LLP
1600 Atlanta Financial Center
3343 Peachtree Road, N.E.
Atlanta, Georgia 30326

Kevin Brittingham

Dear Mr. D'Cruz:

I am writing this letter: 1) to demand that your client remedy immediately certain breaches of the Asset Purchase Agreement between AAC Acquisitions LLC, ("AAC"), Advanced Armament Corp. and Kevin Brittingham dated October 2, 2009 ("the APA"); 2) to demand that he transfer certain firearms and other property to AAC; 3) to remind Mr. Brittingham of certain important continuing obligations he has to AAC, and 4) to respond to your letter of January 12, 2012.

Paragraph 6.10 of the APA prohibits Mr. Brittingham and Advanced Armament Corp. from using or allowing an affiliate to use any name, slogan, logo, trademark, service mark, trade name or internet domain name that is similar to or reasonably likely to cause confusion with AAC's business. This provision also required Advanced Armament Corp. to file a certificate with the State of Georgia and all states in which Advanced Armament Corp. was qualified to do business changing its name to Random Ventures, Inc. It is my understanding that Mr. Brittingham still controls an entity known as AAC, Inc. and this entity continues to have a federal firearms license. The name of this entity is obviously very similar to and likely to cause confusion with AAC. This is a breach of the APA. If Mr. Brittingham has not already changed the name of Advanced Armament Corp. to Random Ventures, Inc., this is a separate breach. Mr. Brittingham is obligated under the Paragraph 6.10 of the APA to cease using the names AAC, Inc. and Advanced Armament Corp. immediately. If Mr. Brittingham plans for AAC, Inc. to continue to exist and have a federal firearms license, he must change its name to something not confusing with or similar to AAC and amend his federal firearms license to reflect the new name of this entity.

Article 1.1 of the APA provides that Advanced Armament Corp. and Mr. Brittingham sold the rights, title and interest in all product inventory to AAC except for certain assets described in a Schedule 1.2(i), which is not applicable here. Section 6.9(f) of the APA required Advanced

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Armament Corp. to apply to ATF for the transfer and registration of all NFA purchased firearms in its acquisition and disposition records and further required it to terminate its federal firearms license. AAC has conducted a comprehensive inventory since Mr. Brittingham's termination and identified 514 firearm silencers which were conveyed to AAC through the APA but were never properly transferred to AAC by Mr. Brittingham and Advanced Armament Corp. This is another breach of the APA. A spreadsheet listing the firearms silencers in question is attached. To complete the transfer of these firearms to AAC, Mr. Brittingham must promptly execute the Form 3 transfer application, which is also attached. I note that these 514 firearm silencers are currently locked and secured in a cage at AAC to which only you and/or your client has the key.

Similarly, AAC purchased 14 "post-sample" machine guns from Advanced Armament Corp. and Mr. Brittingham through the APA. It is my understanding that Mr. Brittingham had discussions regarding the transfer of these firearms to AAC before his termination and we ask that he cooperate as we complete this process. We will be in touch with you in the near future to identify the additional steps that need to be taken to complete this transfer. A list of these firearms is also attached.

ACC's recently completed inventory also revealed three NFA firearms which do not appear in either AAC, Inc.'s or AAC's bound books. They are identified in an attachment to this letter. If Mr. Brittingham believes that these silencers belong to him, he should produce proof of ownership and registration within 72 hours. If we do not hear from you during this time period, ACC will either destroy the silencers or abandon them to ATF.

We have also corresponded several times regarding certain firearms which were located at ACC and identified immediately after Mr. Brittingham's termination as belonging to him. I understand Mr. Brittingham attempted to retrieve these weapons recently but did not bring his key with him. As you know, since his termination Mr. Brittingham alone controls access to these firearms and AAC does not have a key to the cage where they have been stored. If Mr. Brittingham has not yet retrieved his weapons by the time you receive this letter, he should make arrangements to do so promptly and remember to bring the appropriate paperwork and key with him.

Next, AAC has reconciled expense reports that Mr. Brittingham has previously submitted with its inventory. This reconciliation demonstrates that Mr. Brittingham purchased additional firearms and equipment while he worked for AAC and then sought reimbursement for these purchases, but he retains the property today. This property belongs to AAC because Mr. Brittingham requested and received reimbursement for all of these purchases. These firearms and other property need to be returned by Mr. Brittingham to AAC immediately.

I also write to remind Mr. Brittingham of certain obligations he has to AAC under the APA and his Employment Agreement. Specifically, Section 1.1 of the APA provided that AAC purchased all of Advanced Armament Corp.'s intellectual property. Section 6 of the APA includes a confidentiality provision, non-compete provision and non-disparagement provision. Mr. Brittingham's Employment Agreement also contains confidentiality, non-competition, non-solicitation and non-disparagement provisions. Both contracts allow AAC to obtain immediate injunctive relief, as well as damages, in the event he violates these provisions. Mr. Brittingham needs to understand that if he attempts to use AAC's intellectual property and/or compete against AAC, the Company stands ready to enforce its rights under these agreements to the

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maximum extent possible. The same holds true if Mr. Brittingham fails to remedy the existing breaches described above.

Turning to your letter of January 12, 2012, AAC denies that it breached Mr. Brittingham's Employment Agreement or the APA. The grounds for Mr. Brittingham's termination are set forth in his original termination letter. I will not repeat everything here, but suffice it to say that he committed flagrant compliance violations and repeatedly ignored the ATF regulations and federal statutes governing AAC's operations. He was given a second chance when he was put on probation in lieu of termination, but he squandered that opportunity. All of this clearly justified terminating him for cause.

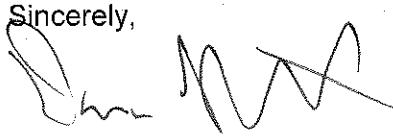
With respect to his computer, Mr. Brittingham was given a business computer to use, but chose instead to use his personal computer for business purposes. This was a clear violation of the Company's Computer Network Acceptable Use policy, which Mr. Brittingham agreed to follow on October 3, 2009. Had he complied with the Company policy and used his personal computer for personal purposes and his business computer for business purposes, there would have been no need for the company to have an independent consultant image the hard drive. AAC promptly returned the computer to Mr. Brittingham after the image was made and it was confirmed he had violated Company policy by commingling business and personal information on the computer. AAC paid to have the independent consultant install a new operating system for him. As soon as Mr. Brittingham identifies the personal information he wants on the computer, it will be returned to him and deleted from the imaged hard drive and none of the personal information will be shared with AAC. AAC will only retain the business information.

I understand Mr. Brittingham submitted three expense reports on December 8, 2011. Two of these have been approved and he can expect reimbursement for these expense reports next week. The third one is being reviewed now. We understand that Mr. Brittingham has been paid for all of his accrued but unused vacation pay. If Mr. Brittingham disputes this, he should submit a detailed account of any vacation he took and unpaid vacation days to which he claims he is still entitled. There was never an agreement between AAC and FN and therefore no royalty payments are due to Mr. Brittingham.

You have also requested various documents from AAC. Mr. Brittingham was given copies of most of these documents, made copies himself or had access to them while he worked for AAC and knows very well what they state. While the company has no obligation to provide Mr. Brittingham a copy of his personnel file, I attach it to this letter.

Please let me know if Mr. Brittingham will voluntarily comply with the demands I have made in this letter by Friday, February 10, 2012.

Sincerely,


Dana L. Rust

Enclosures

EXHIBIT A

U.S. Department of Justice
Bureau of Alcohol, Tobacco, Firearms and Explosives

**Application for Tax-Exempt Transfer of Firearm
and Registration to Special Occupational Taxpayer
(National Firearms Act)**

ATF Control Number

1. Transferee's Name and Address (*as they appear on the Federal Firearms License, including trade name, if any*)

Advanced Armament Corp., LLC
2408 Tech Center Pkwy, Bldg. H, Suite 150
Lawrenceville, GA 30043

LLC

To be submitted in duplicate by transferor of firearm

To: National Firearms Act Branch
Bureau of Alcohol, Tobacco, Firearms
and Explosives
244 Needy Road, Martinsburg, WV 25405

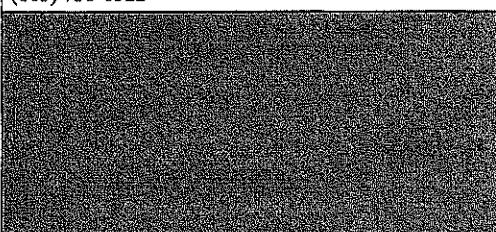
 Sole Proprietor Partnership Corporation

- 2a. Transferor's Name and Address (*as they appear on the Federal Firearms License, including trade name, if any*)

Advanced Armament Corp.
1434 Hillcrest Road
Norcross, GA 30093-2603

 Sole Proprietor Partnership Corporation

2b. Transferor's Telephone Number and Area Code
(803) 736-0522



The above-named and undersigned transferor and special (*occupational*) taxpayer hereby makes application as required by Section 5812 of the National Firearms Act to transfer, without payment of tax, and register the firearm described below to special (*occupational*) taxpayer identified as the transferee in this application.

3. Description of Firearm (*Complete items a through h, if applicable*)

a. Name and Address of Manufacturer and/or Importer of Firearm	b. Type of Firearm (See instruction 1c)	c. Caliber, Gauge or Size (Specify)	d. Model		
			Length (Inches)	e. Of Barrel *See Attached	f. Overall *See Attached
Advanced Armament Corp. 1434 Hillcrest Road Norcross, GA 30093-2603	Silencer	* See Attached	g. Serial Number *See Attached		

h. Additional Description or Data Appearing on Firearm (*Attach additional sheet if necessary*)

4. Transferee's Federal Firearms License

(Give complete 15-digit number) (See Instruction 2b)

First 6 digits	2-digits	2-digits	5-digits
158135	07	3G	06236

5. Transferee's Special (Occupational) Tax Status

a. Employer Identification Number

38-3804450

b. Class

2

6. Transferee's Federal Firearms License

(Give complete 15-digit number) (See Instruction 2b)

First 6 digits	2-digits	2-digits	5-digits
158135	07	1D	02617

7. Transferor's Special (Occupational) Tax Status

a. Employer Identification Number

58-2466585

b. Class

2

8. Consent to Disclosure of Information to Transferee (See instruction 8). I do or do not (*Circle one*) authorize ATF to provide information relating to this application to the above-named transferee.

I believe I am entitled to exemption from payment of the transfer tax imposed by Section 5811, National Firearms Act (NFA), on the firearm described above because the transferee named herein is qualified under the NFA to manufacture, import or deal in that type of firearm.

UNDER PENALTIES OF PERJURY, I DECLARE that I have examined this application, and to the best of my knowledge and belief it is true, correct and complete.

9. Original Signature or Transferor (Or authorized official)

10. Name and Title of Authorized Official
(Print or type)

11. Date

The Space Below is for the Use of the Bureau of Alcohol, Tobacco, Firearms and Explosives

By Authority of the Director, this Application has been Examined, and the Transfer and Registration of the Firearm Described Herein and the Interstate Movement of that Firearm, When Applicable, to the Transferee Are:

 Approved (*with the following conditions, if any*) Disapproved (*For the following reasons*)

Authorized ATF Official

Date

ON AAC INC FFL

Description of firearm						
Manufacturer and/or Importer	Country of Manufacture	Model	Serial No.	Qty.	Type	Caliber or Gauge
AAC	U.S.	M9-SD	SA-1326	1	SI	
AAC	U.S.	Scar SD	026	1	SI	
AAC	U.S.	Scar SD	027	1	SI	
AAC	U.S.	PHOENIX	1022-083	1	SI	
AAC	U.S.	PHOENIX	1022-2038	1	SI	
AAC	U.S.	417-SD	17-0002	1	SI	
AAC	U.S.	417-SD	17-0003	1	SI	
AAC	U.S.	BLACKBOX	1BB	1	SI	
RUGER	U.S.	22/45	220-69118	1	SI	
RUGER	U.S.	22/45	223-91531	1	SI	
AAC	U.S.	SPR/M4	3/75-A32	1	SI	
AAC	U.S.	FIVESEVEN	5.7-002	1	SI	
AAC	U.S.	CYCLOPS	50-0017	1	SI	
AAC	U.S.	CYCLOPS	50-0061	1	SI	
Browning	U.S.	BUCKMARK	515MZ15743	1	SI	
AAC	U.S.	FIVESEVEN	57-10051	1	SI	
AAC	U.S.	FIVESEVEN	57-10131	1	SI	
AAC	U.S.	CYCLONE	762-057	1	SI	
AAC	U.S.	TITAN	AISM-0833	1	SI	
AAC	U.S.	TITAN	AISM-0838	1	SI	
AAC	U.S.	TITAN	AISM-0860	1	SI	
AAC	U.S.	TITAN	AISM-0908	1	SI	
AURORO TACTICAL	U.S.	AT 22 HS	AT 1109	1	SI	
AAC	U.S.	AVENGEFR	AVR-053	1	SI	
AAC	U.S.	AVENGER	AVR-071	1	SI	
AAC	U.S.	AVENGER	AVR-1046	1	SI	
AAC	U.S.	762-SD	B0043	1	SI	
AAC	U.S.	762-SD	B02510	1	SI	
AAC	U.S.	762-SD	B0281	1	SI	
AAC	U.S.	762-SD	B0282	1	SI	
AAC	U.S.	762-SD	B0375	1	SI	
AAC	U.S.	762-SD	B0981	1	SI	
AAC	U.S.	762-SD	B1030	1	SI	
AAC	U.S.	762-SD	B1166	1	SI	
AAC	U.S.	762-SD	B1167	1	SI	
AAC	U.S.	762-SD	B1215	1	SI	
AAC	U.S.	762-SD	B1270	1	SI	
AAC	U.S.	BLACKBOX	BBX-4500	1	SI	

AAC	U.S.	BLACKBOX	BBX-4501	1	SI	
AAC	U.S.	BLACKBOX	BBX-4502	1	SI	
AAC	U.S.	BLACKBOX	BBX-4503	1	SI	
AAC	U.S.	BLACKBOX	BBX-4504	1	SI	
AAC	U.S.	BLACKBOX	BBX-4505	1	SI	
AAC	U.S.	BLACK BOX	BBX-4506	1	SI	
AAC	U.S.	BLACKOUT	BO30-001	1	SI	
AAC	U.S.	Blackout .30	BO30-002	1	SI	
AAC	U.S.	BLACKOUT	BO9-001	1	SI	
AAC	U.S.	BLACKOUT 9	BO9-003	1	SI	
AAC	U.S.	BLACKOUT	BOM4-001	1	SI	
AAC	U.S.	BLACKOUT	BOM4-002	1	SI	
AAC	U.S.	SCAR-SD TI	BST-0008	1	SI	
AAC	U.S.	CYCLONE	C0129	1	SI	
AAC	U.S.	CYCLONE	C0131	1	SI	
AAC	U.S.	CYCLONE	C0138	1	SI	
AAC	U.S.	CYCLONE	C01510	1	SI	
AAC	U.S.	CYCLONE	C0239	1	SI	
AAC	U.S.	CYCLONE	C0240	1	SI	
AAC	U.S.	CYCLONE K	C1021	1	SI	
AAC	U.S.	CYCLONE-K	C1074	1	SI	
AAC	U.S.	CYCLONE K	C1075	1	SI	
AAC	U.S.	CYCLONE K	C1087	1	SI	
AAC	U.S.	CF-9	CF9-001	1	SI	
AAC	U.S.	CF-9	CF9-002	1	SI	
AAC	U.S.	CLOAK	CLK-2033	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2027	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2029	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2030	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2031	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2032	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2033	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2034	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2039	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2040	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2041	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2042	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2043	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2044	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2046	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2047	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2048	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2049	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2050	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2051	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2052	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2053	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2054	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2077	1	SI	

AAC	U.S.	EVO CQC-9	CQC9-2080	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2081	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2082	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2083	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2084	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2085	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2086	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2087	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2088	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2089	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2091	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2092	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2093	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2094	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2095	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2096	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2098	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2099	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2100	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2101	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2102	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2103	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2104	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2105	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2106	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2107	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2108	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2109	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2110	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2111	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2112	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2113	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2114	1	SI	
AAC	U.S.	EVO CQC-9	CQC9-2115	1	SI	
AAC	U.S.	CYCLONE	CYN-01061	1	SI	
AAC	U.S.	416-SD	D0063	1	SI	
AAC	U.S.	416-SD	D0165	1	SI	
AAC	U.S.	416-SD	D0224	1	SI	
AAC	U.S.	416-SD	D0225	1	SI	
AAC	U.S.	416-SD	D0226	1	SI	
AAC	U.S.	416-SD	D0227	1	SI	
AAC	U.S.	416-SD	D0393	1	SI	
AAC	U.S.	416-SD	D0414	1	SI	
AAC	U.S.	416-SD	D0415	1	SI	
AAC	U.S.	416-SD	D0416	1	SI	
AAC	U.S.	416-SD	D0810	1	SI	
AAC	U.S.	416-SD	D0955	1	SI	
AAC	U.S.	416-SD	D0956	1	SI	
AAC	U.S.	416-SD	D0957	1	SI	

AAC	U.S.	416-SD	D0958	1	SI	
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AAC	U.S.	416-SD	D0960	1	SI	
AAC	U.S.	416-SD	D0961	1	SI	
AAC	U.S.	416-SD	D0962	1	SI	
AAC	U.S.	416-SD	D0963	1	SI	
AAC	U.S.	EVOLUTION 40	E40-4147	1	SI	
AAC	U.S.	EVO 40	E40-4419	1	SI	
AAC	U.S.	EVO 40	E40-4421	1	SI	
AAC	U.S.	EVO 40	E40-4422	1	SI	
AAC	U.S.	EVOLUTION 45	E45-2182	1	SI	
AAC	U.S.	EVO 45	E45-2651	1	SI	
AAC	U.S.	EVO 45	E45-2740	1	SI	
AAC	U.S.	EVO 45	E45-3001	1	SI	
AAC	U.S.	EVO 45	E45-3244	1	SI	
AAC	U.S.	EVO 45	E45-3245	1	SI	
AAC	U.S.	EVO 9	E9-2174	1	SI	
AAC	U.S.	EVO 9	E9-2415	1	SI	
AAC	U.S.	EVO 9	E9-2443	1	SI	
AAC	U.S.	EVO 9	E9-3107	1	SI	
AAC	U.S.	Evolution 9	E9-3810	1	SI	
AAC	U.S.	ECLIPSE	ECP-014	1	SI	
AAC	U.S.	ELEMENT	EL-0001	1	SI	
AAC	U.S.	ELEMENT	EL-00011	1	SI	
AAC	U.S.	ELEMENT	EL-0544	1	SI	
AAC	U.S.	ELEMENT	EL-0546	1	SI	
AAC	U.S.	ELEMENT	EL-0547	1	SI	
AAC	U.S.	ELEMENT	EL-0548	1	SI	
AAC	U.S.	ELEMENT	EL-0549	1	SI	
AAC	U.S.	ELEMENT	EL-0552	1	SI	
AAC	U.S.	ELEMENT	EL-0553	1	SI	
AAC	U.S.	ELEMENT	EL-0736	1	SI	
AAC	U.S.	ELEMENT	EL-0850	1	SI	
AAC	U.S.	Element	EL-0851	1	SI	
AAC	U.S.	ELEMENT	EL-0852	1	SI	
AAC	U.S.	ELEMENT	EL-X002	1	SI	
AAC	U.S.	ENIGMA	EN-0001	1	SI	
AAC	U.S.	ENIGMA	EN-0002	1	SI	
AAC	U.S.	ENIGMA	EN-0003	1	SI	
AAC	U.S.	ENIGMA	EN-0004	1	SI	
AAC	U.S.	ENIGMA	EN-0005	1	SI	
AAC	U.S.	ENIGMA	EN-0006	1	SI	
AAC	U.S.	DRAGONFLY	FLY-044	1	SI	
AAC	U.S.	DRAGONFLY	FLY-047	1	SI	
AAC	U.S.	DRAGON FLY	FLY-2011	1	SI	
AAC	U.S.	CQC-M	FNMHM1	1	SI	
AAC	U.S.	ACR-SD	GR00101	1	SI	
AAC	U.S.	SCAR-H	H2198	1	SI	
AAC	U.S.	G-36 SD	HK-002	1	SI	

AAC	U.S.	SCAR-H-SD BLACKC	HSV-0004	1	SI	
AAC	U.S.	KRINKOV	KGB-0001	1	SI	
AAC	U.S.	KRINKOV	KGB-2006A	1	SI	
AAC	U.S.	SCAR-SD	L0262	1	SI	
AAC	U.S.	SCAR-SD	L0453	1	SI	
AAC	U.S.	SCAR-SD	L0454	1	SI	
AAC	U.S.	SCAR-SD	L1057	1	SI	
AAC	U.S.	SCAR-SD	L1074	1	SI	
AAC	U.S.	M4-2000	M1006	1	SI	
AAC	U.S.	M4-1000	M1108	1	SI	
AAC	U.S.	M4-1000	M1109	1	SI	
AAC	U.S.	M4-1000	M1301	1	SI	
AAC	U.S.	M4-1000	M1302	1	SI	
AAC	U.S.	M4-1000	M1303	1	SI	
AAC	U.S.	M4-1000	M13241	1	SI	
AAC	U.S.	M4-1000	M1477	1	SI	
AAC	U.S.	M4-1000	M1592	1	SI	
AAC	U.S.	M4-1000	M168	1	SI	
AAC	U.S.	M4-1000	M1700	1	SI	
AAC	U.S.	M4-1000	M1988	1	SI	
AAC	U.S.	M4-1000	M1989	1	SI	
AAC	U.S.	M4-1000	M2163	1	SI	
AAC	U.S.	M4-1000	M2291	1	SI	
AAC	U.S.	M4-1000	M2348	1	SI	
AAC	U.S.	M4-1000	M2349	1	SI	
AAC	U.S.	M4-1000	M2350	1	SI	
AAC	U.S.	M4-2000	M4-0718	1	SI	
AAC	U.S.	M4-2000	M4-1008	1	SI	
AAC	U.S.	M47-2000	M47-001	1	SI	
AAC	U.S.	M4-2000	M5288	1	SI	
AAC	U.S.	M4-2000	M5457	1	SI	
AAC	U.S.	M4-2000	M5520	1	SI	
AAC	U.S.	M4-2000	M5521	1	SI	
AAC	U.S.	M4-2000	M5522	1	SI	
AAC	U.S.	M4-2000	M5551	1	SI	
AAC	U.S.	M4-2000	M5552	1	SI	
AAC	U.S.	M4-2000	M5585	1	SI	
AAC	U.S.	249-SD	M5609	1	SI	
AAC	U.S.	M4-2000	M5610	1	SI	
AAC	U.S.	M4-2000	M5615	1	SI	
AAC	U.S.	M4-2000	M5719	1	SI	
AAC	U.S.	M4-2000	M5946	1	SI	
AAC	U.S.	M4-2000	M5947	1	SI	
AAC	U.S.	M4-2000	M5948	1	SI	
AAC	U.S.	M4-2000	M5986	1	SI	
AAC	U.S.	M4-2000	M5988	1	SI	
AAC	U.S.	300 BLACKOUT	M6115	1	SI	
AAC	U.S.	M4-2000	M6153	1	SI	
AAC	U.S.	M4-2000	M8018	1	SI	

AAC	U.S.	M4-2000	M8020	1	SI	
AAC	U.S.	M4-2000	M8253	1	SI	
AAC	U.S.	M4-2000	M8301	1	SI	
AAC	U.S.	M4-2000	M8606	1	SI	
AAC	U.S.	M4-2000	M8943	1	SI	
AAC	U.S.	M4-2000	M9376	1	SI	
AAC	U.S.	M4-2000	M9554	1	SI	
AAC	U.S.	M4-2000	M9711	1	SI	
AAC	U.S.	M4-2000	M9712	1	SI	
AAC	U.S.	M4-2000	M98110	1	SI	
AAC	U.S.	M4-2000	M9840	1	SI	
AAC	U.S.	M4-2000	M98400	1	SI	
AAC	U.S.	240-SD	MAG-1007	1	SI	
AAC	U.S.	SCAR HSD	MK17-2014	1	SI	
AAC	U.S.	MP7-SD	MP7-3	1	SI	
AAC	U.S.	MP7-SD	MP7-4	1	SI	
AAC	U.S.	MP7-SD	MP7-6	1	SI	
AAC	U.S.	GRENDEL	O0001	1	SI	
AAC	U.S.	GRENDEL	O0006	1	SI	
AAC	U.S.	GRENDEL	O0007	1	SI	
AAC	U.S.	GRENDEL	O0008	1	SI	
AAC	U.S.	GRENDEL	O0009	1	SI	
AAC	U.S.	OMNI	O-001	1	SI	
AAC	U.S.	GRENDEL	O0010	1	SI	
AAC	U.S.	OMNI	OQD-0002	1	SI	
AAC	U.S.	OMNI	OQD-0006	1	SI	
AAC	U.S.	OMNI	OQD-2151	1	SI	
AAC	U.S.	OMNI	OQD-2173	1	SI	
SILENCER CO	U.S.	45OSPREY	OSP45-0061	1	SI	
SILENCER CO	U.S.	9OSPREY	OSP9M-0036	1	SI	
AAC	U.S.	P90-SD	P90-028	1	SI	
AAC	U.S.	P90-SD	P90-103	1	SI	
AAC	U.S.	P90-SD	P90-104	1	SI	
AAC	U.S.	P90-SD	P90-105	1	SI	
AAC	U.S.	PRODIGY	PB-0003	1	SI	
AAC	U.S.	PRODIGY	PB-0005	1	SI	
AAC	U.S.	PRODIGY	PDG-20781	1	SI	
AAC	U.S.	PRODIGY	PDG-2215	1	SI	
AAC	U.S.	PRODIGY 08	PDG-2253	1	SI	
AAC	U.S.	PRODIGY	PDG-2254	1	SI	
AAC	U.S.	PRODIGY	PDG-2255	1	SI	
AAC	U.S.	PRODIGY	PDG-2256	1	SI	
AAC	U.S.	PRODIGY	PDG-2257	1	SI	
AAC	U.S.	PRODIGY	PDG-2258	1	SI	
AAC	U.S.	PRODIGY	PDG-2259	1	SI	
AAC	U.S.	PRODIGY 08	PDG-2260	1	SI	
AAC	U.S.	PRODIGY	PDG-2261	1	SI	
AAC	U.S.	PHOENIX	PHNX-0293	1	SI	
AAC	U.S.	PILOT	PLT-2865	1	SI	

AAC	U.S.	PILOT	PLT-3223	1	SI	
AAC	U.S.	PILOT	PLT-3508	1	SI	
AAC	U.S.	PILOT	PLT-3593	1	SI	
AAC	U.S.	PILOT	PLT-4129	1	SI	
AAC	U.S.	PILOT	PLT-4130	1	SI	
AAC	U.S.	PILOT	PLT-4148	1	SI	
AAC	U.S.	PILOT	PLT-4149	1	SI	
AAC	U.S.	PILOT	PLT-4150	1	SI	
AAC	U.S.	PILOT	PLT-4168	1	SI	
AAC	U.S.	PILOT	PLT-4169	1	SI	
AAC	U.S.	PILOT	PLT-4170	1	SI	
AAC	U.S.	PILOT	PLT-4177	1	SI	
AAC	U.S.	PILOT	PLT-4178	1	SI	
AAC	U.S.	PILOT	PLT-4179	1	SI	
AAC	U.S.	PILOT	PLT-4180	1	SI	
AAC	U.S.	PILOT	PLT-4181	1	SI	
AAC	U.S.	PILOT	PLT-4182	1	SI	
AAC	U.S.	PILOT	PLT-4183	1	SI	
AAC	U.S.	PILOT	PLT-4184	1	SI	
AAC	U.S.	PILOT	PLT-4185	1	SI	
AAC	U.S.	PILOT	PLT-4186	1	SI	
AAC	U.S.	PILOT	PLT-4187	1	SI	
AAC	U.S.	PILOT	PLT-4188	1	SI	
AAC	U.S.	PILOT	PLT-4189	1	SI	
AAC	U.S.	PILOT	PLT-4195	1	SI	
AAC	U.S.	PILOT	PLT-4200	1	SI	
AAC	U.S.	PILOT	PLT-4203	1	SI	
AAC	U.S.	Pilot	PLT-4255	1	SI	
AAC	U.S.	PILOT	PLT-4256	1	SI	
AAC	U.S.	PILOT	PLT-4257	1	SI	
AAC	U.S.	PRODIGY	PRG-2005	1	SI	
AAC	U.S.	PRODIGY	PRG-2007	1	SI	
SUREFIRE	U.S.	FA338SS	Q01049	1	SI	
QUICK SILVER	U.S.		QSMS851	1	SI	
AAC	U.S.	RANGER 2	R0023	1	SI	
AAC	U.S.	RANGER 2	R0037	1	SI	
SureFire	U.S.	FA556-212	R01418	1	SI	
AAC	U.S.	RANGER 2	R0181	1	SI	
AAC	U.S.	RANGER 2	R0252	1	SI	
AAC	U.S.	RANGER 2	R0289	1	SI	
SUREFIRE	U.S.	FA556-212	R0418	1	SI	
AAC	U.S.	RANGER 2	R0627	1	SI	
AAC	U.S.	RANGER 2	R0629	1	SI	
AAC	U.S.	RANGER 2	R0988	1	SI	
AAC	U.S.	REC7SD-6.8	R7-0022	1	SI	
AAC	U.S.	REC7-SD	R7-0024	1	SI	
AAC	U.S.	REC7-SD	R7-0025	1	SI	
AAC	U.S.	SPR/M4	S0053	1	SI	
AAC	U.S.	SPR/M4	S0076	1	SI	

AAC	U.S.	SPR/M4	S0077	1	SI	
AAC	U.S.	SPR/M4	S0192	1	SI	
AAC	U.S.	SPR/M4	S0219	1	SI	
AAC	U.S.	SPR/M4	S0220	1	SI	
AAC	U.S.	SPR/M4	S0221	1	SI	
AAC	U.S.	SPR/M4	S0232	1	SI	
AAC	U.S.	SPR/M4	S0266	1	SI	
AAC	U.S.	SPR/M4	S0268	1	SI	
AAC	U.S.	SPR/M4	S0302	1	SI	
AAC	U.S.	SPR/M4	S0303	1	SI	
AAC	U.S.	SPR/M4	S0304	1	SI	
AAC	U.S.	SPR/M4	S0305	1	SI	
AAC	U.S.	SPR/M4	S0306	1	SI	
AAC	U.S.	SPR/M4	S0309	1	SI	
AAC	U.S.	SPR/M4	S0311	1	SI	
AAC	U.S.	SPR/M4	S0462	1	SI	
AAC	U.S.	SPR/M4	S0567	1	SI	
AAC	U.S.	SPR/M4	S0575	1	SI	
AAC	U.S.	SPR/M4	S0604	1	SI	
AAC	U.S.	SPR/M4	S0605	1	SI	
AAC	U.S.	SPR/M4	S0606	1	SI	
AAC	U.S.	SPR/M4	S0665	1	SI	
AAC	U.S.	SPR/M4	S0712	1	SI	
AAC	U.S.	SPR/M4	S0713	1	SI	
AAC	U.S.	SPR/M4	S0735	1	SI	
AAC	U.S.	S2R BLACKOUT	S2R-0004	1	SI	
AAC	U.S.	EVO STEALTH	S9-2001	1	SI	
AAC	U.S.	EVO STEALTH	S9-2011	1	SI	
AAC	U.S.	SPIDER	SA-1168	1	SI	
AAC	U.S.	PHOENIX	SA-1650	1	SI	
AAC	U.S.	CLOAK	SA-21095	1	SI	
AAC	U.S.	CLOAK	SA-21097	1	SI	
AAC	U.S.	CLOAK	SA-21098	1	SI	
AAC	U.S.	STINGER	SA-2118	1	SI	
AAC	U.S.	STINGER	SA-2133	1	SI	
AAC	U.S.	SCORPION	SA-2648	1	SI	
AAC	U.S.	SCORPION	SA-26551	1	SI	
AAC	U.S.	SCORPION	SA-2660	1	SI	
AAC	U.S.	PHOENIX	SA-5565	1	SI	
AAC	U.S.	PILOT	SA-66781	1	SI	
AAC	U.S.	SCARAB	SA-8661	1	SI	
AAC	U.S.	SCARAB	SA-8680	1	SI	
AAC	U.S.	249-SD	SAW-0001	1	SI	
AAC	U.S.	249-SD	SAW-0002	1	SI	
AAC	U.S.	249-SD	SAW-0003	1	SI	
AAC	U.S.	249-SD	SAW-0004	1	SI	
AAC	U.S.	249-SD	SAW-0006	1	SI	
AAC	U.S.	249-SD	SAW-0007	1	SI	
AAC	U.S.	249-SD	SAW-0008	1	SI	

AAC	U.S.	249-SD	SAW-0009	1	SI	
AAC	U.S.	249-SD	SAW-0010	1	SI	
AAC	U.S.	249-SD	SAW-0011	1	SI	
AAC	U.S.	249-SD	SAW-0012	1	SI	
AAC	U.S.	SLIM LITER	SLR-003	1	SI	
AAC	U.S.	SLIM LITER	SLR-004	1	SI	
AAC	U.S.	SLIM LITER	SLR-005	1	SI	
AAC	U.S.	SLIM LITER	SLR-006	1	SI	
AAC	U.S.	SLIM LITER	SLR-007	1	SI	
AAC	U.S.	SLIM LITER	SLR-008	1	SI	
AAC	U.S.	SLIM LITER	SLR-010	1	SI	
AAC	U.S.	SLIM LITER	SLR-012	1	SI	
AAC	U.S.	SLIM LITER	SLR-013	1	SI	
AAC	U.S.	SLIM LITER	SLR-014	1	SI	
AAC	U.S.	SLIM LITER	SLR-015	1	SI	
AAC	U.S.	SLIM LITER	SLR-016	1	SI	
AAC	U.S.	SLIM LITER	SLR-017	1	SI	
AAC	U.S.	SLIM LITER	SLR-018	1	SI	
AAC	U.S.	SLIM LITER	SLR-019	1	SI	
AAC	U.S.	SLIM LITER	SLR-020	1	SI	
AAC	U.S.	SLIM LITER	SLR-021	1	SI	
AAC	U.S.	SLIM LITER	SLR-023	1	SI	
AAC	U.S.	SLIM LITER	SLR-025	1	SI	
AAC	U.S.	SLIM LITER	SLR-026	1	SI	
AAC	U.S.	SLIM LITER	SLR-027	1	SI	
AAC	U.S.	SLIM LITER	SLR-028	1	SI	
AAC	U.S.	SLIM LITER	SLR-029	1	SI	
AAC	U.S.	SLIM LITER	SLR-033	1	SI	
AAC	U.S.	SLIM LITER	SLR-034	1	SI	
AAC	U.S.	SLIM LITER	SLR-036	1	SI	
AAC	U.S.	SLIM LITER	SLR-038	1	SI	
AAC	U.S.	SLIM LITER	SLR-039	1	SI	
AAC	U.S.	SLIM LITER	SLR-041	1	SI	
AAC	U.S.	SLIM LITER	SLR-043	1	SI	
AAC	U.S.	SLIM LITER	SLR-044	1	SI	
AAC	U.S.	SLIM LITER	SLR-045	1	SI	
AAC	U.S.	SLIM LITER	SLR-047	1	SI	
AAC	U.S.	SLIM LITER	SLR-048	1	SI	
AAC	U.S.	SLIM LITER	SLR-049	1	SI	
AAC	U.S.	SLIM LITER	SLR-051	1	SI	
AAC	U.S.	SLIM LITER	SLR-054	1	SI	
AAC	U.S.	SLIM LITER	SLR-055	1	SI	
AAC	U.S.	SLIM LITER	SLR-055	1	SI	
AAC	U.S.	SLIM LITER	SLR-057	1	SI	
AAC	U.S.	SLIM LITER	SLR-058	1	SI	
AAC	U.S.	SLIM LITER	SLR-059	1	SI	
AAC	U.S.	SLIM LITER	SLR-060	1	SI	
AAC	U.S.	SLIM LITER	SLR-061	1	SI	
AAC	U.S.	SLIM LITER	SLR-063	1	SI	

AAC	U.S.	SLIM LITER	SLR-065	1	SI	
AAC	U.S.	SLIM LITER	SLR-066	1	SI	
AAC	U.S.	SLIM LITER	SLR-067	1	SI	
AAC	U.S.	SLIM LITER	SLR-069	1	SI	
AAC	U.S.	SLIM LITER	SLR-071	1	SI	
AAC	U.S.	SLIM LITER	SLR-072	1	SI	
AAC	U.S.	SLIM LITER	SLR-073	1	SI	
AAC	U.S.	SLIM LITER	SLR-074	1	SI	
AAC	U.S.	SLIM LITER	SLR-077	1	SI	
AAC	U.S.	SLIM LITER	SLR-078	1	SI	
AAC	U.S.	SLIM LITER	SLR-082	1	SI	
AAC	U.S.	SLIM LITER	SLR-083	1	SI	
AAC	U.S.	SLIM LITER	SLR-084	1	SI	
AAC	U.S.	SLIM LITER	SLR-085	1	SI	
AAC	U.S.	SLIM LITER	SLR-086	1	SI	
AAC	U.S.	SLIM LITER	SLR-088	1	SI	
AAC	U.S.	SLIM LITER	SLR-089	1	SI	
AAC	U.S.	SLIM LITER	SLR-090	1	SI	
AAC	U.S.	SLIM LITER	SLR-091	1	SI	
AAC	U.S.	SLIM LITER	SLR-092	1	SI	
AAC	U.S.	SLIM LITER	SLR-093	1	SI	
AAC	U.S.	SLIM LITER	SLR-095	1	SI	
AAC	U.S.	SLIM LITER	SLR-096	1	SI	
AAC	U.S.	SLIM LITER	SLR-098	1	SI	
AAC	U.S.	SLIM LITER	SLR-099	1	SI	
AAC	U.S.	SLIM LITER	SLR-100	1	SI	
AAC	U.S.	EVO 45	SOF-2057	1	SI	
AAC	U.S.	Striker II	STKR-2143	1	SI	
AAC	U.S.	STRIKER 2	STKR-2144	1	SI	
AAC	U.S.	STRIKER 2	STKR-2145	1	SI	
AAC	U.S.	STRIKER 2	STKR-2146	1	SI	
AAC	U.S.	STRIKER 2	STKR-2147	1	SI	
AAC	U.S.	STRIKER 2	STKR-2163	1	SI	
AAC	U.S.	STRIKER 2	STKR-2181	1	SI	
AAC	U.S.	STRIKER 2	STKR-2182	1	SI	
AAC	U.S.	STRIKER 2	STKR-2183	1	SI	
AAC	U.S.	STRIKER 2	STKR-2184	1	SI	
AAC	U.S.	STRIKER 2	STKR-2185	1	SI	
AAC	U.S.	STRIKER 2	STKR-2186	1	SI	
AAC	U.S.	NAVY	SWU-011	1	SI	
AAC	U.S.	300-SD	T0031	1	SI	
AAC	U.S.	TI-FIGHTER	TF-0001	1	SI	
AAC	U.S.	TI FIGHTER	TF-0003	1	SI	
AAC	U.S.	TI-FIGHTER	TF-0005	1	SI	
AAC	U.S.	TI FIGHTER	TF-0007	1	SI	
AAC	U.S.	TI-FIGHTER	TF-0008	1	SI	
AAC	U.S.	TI-FIGHTER	TF-0009	1	SI	
AAC	U.S.	TITAN QD	TIQD-0011	1	SI	
AAC	U.S.	TITAN QD	TIQD-0020	1	SI	

AAC	U.S.	TITAN-QD	TIQD-0051	1	SI	
AAC	U.S.	TITAN-QD	TIQD-0209	1	SI	
AAC	U.S.	TIRANT 9	TR-0001	1	SI	
AAC	U.S.	TIRANT 9	TR-0004	1	SI	
AAC	U.S.	TIRANT 9	TR-0054	1	SI	
AAC	U.S.	TIRANT 9	TR-0101	1	SI	
AAC	U.S.	TIRANT 9	TR-0102	1	SI	
AAC	U.S.	TIRANT	TR-0103	1	SI	
AAC	U.S.	TI RANT 9	TR-0368	1	SI	
AAC	U.S.	TI RANT 9	TR-0369	1	SI	
AAC	U.S.	TI RANT 9	TR-0370	1	SI	
AAC	U.S.	TI RANT 9	TR-0371	1	SI	
AAC	U.S.	TI RANT 9	TR-0372	1	SI	
AAC	U.S.	TI RANT 9	TR-0373	1	SI	
AAC	U.S.	TIRANT 9	TR-0483	1	SI	
AAC	U.S.	TIRANT 9	TR-0484	1	SI	
AAC	U.S.	TIRANT 9	TR-0485	1	SI	
AAC	U.S.	TI RANT 45	TR45-0008	1	SI	
AAC	U.S.	TIRANT 45	TR45-0061	1	SI	
AAC	U.S.	TI RANT 45	TR45-0068	1	SI	
AAC	U.S.	TI RANT 9 K	TR9K-0001	1	SI	
AAC	U.S.	TI RANT 9	TR-XXXX2	1	SI	
AAC	U.S.	TI RANT 9	TR-XXXX4	1	SI	
AAC	U.S.	TI RANT 9	TR-XXXX5	1	SI	
AAC	U.S.	TI RANT	TR-XXXX6	1	SI	
AAC	U.S.	AVIATOR	WK-0006	1	SI	
AAC	U.S.	AVIATOR	WK-02321	1	SI	
AAC	U.S.	AVIATOR	WK-0242	1	SI	
AAC	U.S.	AVIATOR	WK-0509	1	SI	
AAC	U.S.	AVIATOR	WK-0603	1	SI	
AAC	U.S.	AVIATOR	WK-0682	1	SI	
AAC	U.S.	AVIATOR	WK-0685	1	SI	
AAC	U.S.	Ti-RANT 9	TR-0483	1	SI	
AAC	U.S.	Ti-RANT 9	TR-0484	1	SI	
AAC	U.S.	Ti-RANT 9	TR-0485	1	SI	

EXHIBIT B

THREE SILENCERS TO BE REVIEWED BY AAC, INC. FOR POSSIBLE REGISTRATION

EXHIBIT C

14 AAC, LLC Post Sample Machineguns

Manufacturer	Model	Serial Number	Type	Caliber
BERETTA	PM125	F38195	M/G	9MM
FN	M240(Mag58)	FN93932	M/G	7.62MM
FN	249(DSA)MOD.249	SAW-003	M/G	5.56MM
HK	UMP	162-001525	M/G	.40S&W
HK	UMP	163-001526	M/G	.45
HK	MP5A2	62-357280	M/G	9MM
HK	MP5K	64-21082	M/G	9MM
HK	MP5-SD	63-99757	M/G	9MM
IMI	MICRO UZI	61073(061073)	M/G	9MM
IMI	MINI UZI	MU04098	M/G	9MM
NORTH FULTON ARMS	PORT SAID SWEDISH K	275652	M/G	9MM
SPRINGFIELD ARMORY	UZI	7220720	M/G	9MM
WALTHER	MPK	31955	M/G	9MM
ZASTAVA YUGOSLAVIA	M61J Skorpion	54544	M/G	7.65mm

EXHIBIT D

U.S. Department of Justice

Bureau of Alcohol, Tobacco, Firearms and Explosives

**Application for an Amended Federal
Firearms License**

All entries must be in ink. Please read attached instructions carefully before completing this form.

Section I

1. Name of Owner or Corporation (<i>If Partnership, include name of each partner</i>)		2. Social Security Number	3. Date of Birth
4. Trade or Business Name (<i>If any</i>)		5. Federal Firearms License Number (<i>Include expiration date</i>)	
6a. Current Business Address (<i>number and street</i>)		7a. New Business Address (<i>number and street</i>)	
6b. City	6c. County	7b. City	7c. County
6d. State	6e. ZIP Code	7d. State	7e. ZIP Code
8a. Current Mailing Address (<i>number and street</i>)		9a. New Mailing Address (<i>number and street</i>)	
8b. City	8c. County	9b. City	9c. County
8d. State	8e. ZIP Code	9d. State	9e. ZIP Code
10a. Current Home Address (<i>number and street</i>)		11a. New Home Address (<i>number and street</i>)	
10b. City	10c. County	11b. City	11c. County
10d. State	10e. ZIP Code	11d. State	11e. ZIP Code
12. Present Telephone Number (<i>With area code</i>) Business _____ Residence _____		13. New Telephone Number (<i>With area code</i>) Business _____ Residence _____	

If Business Is Obtained From Someone Else, Give:

14. Name								15. License Number	
16. Hours of Operation of Licensee's Business (<i>Not Applicable for Collectors</i>)								17. Are the Licensee's Business Premises Open to the General Public During These Hours?	
Time	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Open									
Close									
18. Will Any Other Business, Other Than That for Which the License Was Issued, Be Conducted on the New Premises? Yes <input type="checkbox"/> No <input type="checkbox"/>								19. Licensee's New Premises Are Owned <input type="checkbox"/> Leased <input type="checkbox"/> Rented <input type="checkbox"/>	

20. If the New Premises Are Rented or Leased, Please Specify the Date the Lease or Rental Agreement Begins, the Date the Agreement Terminates, the Term of the Lease or Rental, and the Name, Address and Telephone Number of the Owner of the Property, Attach a Copy of the Lease or Rental Agreement to This Application.

21. Indicate Type of Business Premises at the New Location:

Commercial		Residential	
Storefront	<input type="checkbox"/>	Single/Family Dwelling	<input type="checkbox"/>
Office	<input type="checkbox"/>	Condominium	<input type="checkbox"/>
Rod & Gun Club	<input type="checkbox"/>	Apartment	<input type="checkbox"/>
Military Base	<input type="checkbox"/>	Hotel/Motel	<input type="checkbox"/>
Other (Specify)	<input type="checkbox"/>	Public Housing	<input type="checkbox"/>
		Other (Specify)	<input type="checkbox"/>

If the New Premises Are Located on a Military Installation, Attach a Written Authorization From the Base Commander to Conduct the Firearms Business on the Military Installation.

22. If the New Premises Are Owned By the Applicant, Are There Any Restrictions or Covenants Which Prohibit the Owner From Operating a Business on the Premises? If Yes, on a Separate Sheet, Describe Such Restrictions or Covenants.

Yes No

23. Do Any Zoning Ordinances Prohibit the Conduct of a Firearms Business on the New Premises?

Yes No

24. Is a License, Permit, or Payment of Occupational or Business Tax Required Under State or Local Law to Engage in a Firearms Business From the Premises? If So, Provide Copies.

Yes No

25. Sign Here

Title

Date

Section II - Certification of Compliance With State and Local Law

As Required By 18 U.S.C. 923(d)(1), I Certify That:

1. The business to be conducted under the Federal firearms license is not prohibited by State or local law at the premises indicated in question 5.
2. Within 30 days after the application is approved the business to be conducted at the location indicated in question 5 will comply with the requirements of State and local law applicable to the conduct of business.
3. Business will not be conducted under the amended license until the requirements of State and local law applicable to the business have been met.
4. Notification of this application has been provided to the chief law enforcement officer of the locality in which the premises indicated in question 5 are located by mailing copy 2 of this form to such officer.

26. Certification: Under the Penalties Imposed By 18 U.S.C. 924, I Declare That I Have Examined This Application and the Documents Submitted in Support Hereof, and to the Best of My Knowledge and Belief, They are True, Correct and Complete.

Sign Here

Date

Instruction Sheet for ATF Form 5300.38 (*Detach this sheet before submitting your application*)

All Applications are to be Submitted to:
ATF Federal Firearms Licensing Center
244 Needy Road
Martinsburg, WV 25405

Section 923(d)(1), Title 18, U.S.C., provides the requirements for obtaining a Federal firearms license (FFL). These provisions require applicants for an FFL to certify that the firearms business or activity will be conducted in compliance with State and local law.

The purpose of this application is to require a licensee who moves the licensed premises to a different location during the term of an existing license to certify that the firearms business or activity at the new location will be conducted in compliance with State and local law. The application also requires applicants for an amended license to notify the Chief, Law Enforcement Officer (CLEO) in the locality where the new premises are located of the intent to apply for an amended license, as required by section 923 (d)(1)(F)(iii).

1. Notification of the new location of the business or activity must be given not less than 30 days prior to such removal.
2. Each licensee submitting the ATF Form 5300.38, Application for an Amended Federal Firearms License must provide notification of the intent to apply for an amended FFL to the CLEO in the locality where the new premises are located by mailing or delivering copy 2 of this application to such CLEO.
3. Submit copy 1 of ATF Form 5300.38 to the Chief, Federal Firearms Licensing Center, Bureau of Alcohol, Tobacco, Firearms and Explosives at the address listed above. Mail or deliver copy 2 to the CLEO.
4. PRINT with ball-point pen or type (except for signature at end). All attached sheets must be:
 - a. Identified with your name and address at the top of each page.
 - b. Referenced by the question number being responded to.
5. The certification in Section I, Item 2 and Section II, Item 6 must be executed (signed) by the owner, a partner, or in the case of a corporation, association, etc., by an officer duly authorized to sign for the licensee.
6. IF YOU HAVE QUESTIONS relating to this application, please contact the ATF Federal Firearms Licensing Center, 244 Needy Road, Martinsburg, WV 25405, toll free 1-866-662-2750, fax 1-866-257-2749.

Definition

The term "Chief Law Enforcement Officer" means the Chief of Police, the Sheriff, or an equivalent officer.

Privacy Act Information

The following information is provided pursuant to Section 3 of the Privacy Act of 1974 (5 U.S.C. § 552a(e)(3)):

1. **Authority.** Solicitation of this information is authorized pursuant to 18 U.S.C § 923(a) of the Gun Control Act of 1968. Disclosure of this information is mandatory if the applicant wishes to obtain a Federal firearms license.
2. **Purpose.** To determine the eligibility of the applicant to obtain a firearms license, to determine the ownership of the business, the type of firearms or ammunition to be dealt in, the business hours, the business history and the identity of the responsible person in the business.
3. **Routine Uses.** The information will be used by ATF to make determinations set forth in paragraph 2. In addition, information may be disclosed to other Federal, State, foreign and local law enforcement and regulatory agency personnel to verify information on the application and to aid in the performance of their duties with respect to the enforcement and regulation of firearms and/or ammunition where such disclosure is not prohibited by law. The information may further be disclosed to the Justice Department if it appears that the furnishing of false information may constitute a violation of Federal law. Finally, the information may be disclosed to members of the public in order to verify the information on the application when such disclosure is not prohibited by law.
4. **Effects of Not Supplying Information Requested.** Failure to supply complete information will delay processing and may result in denial of the application.
5. **Disclosure of Social Security Number.** Disclosure of the individual's social security number is voluntary. Under 18 U.S.C. § 923(a), ATF has the authority to solicit this information. The number may be used to verify the individual's identity.

Paperwork Reduction Act

The information required by this form is in accordance with the Paperwork Reduction Act of 1995. The purpose of the information is to certify whether the operations will be in conformity with Federal, State and local law. The information is subject to inspection by ATF officers. The information requested is mandatory by statute (18 U.S.C. 923).

The estimated average burden associated with this collection is 1 hour and 15 minutes per respondent or recordkeeper, depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to Reports Management Officer, Document Services Branch, Bureau of Alcohol, Tobacco, Firearms and Explosives, Washington, DC 20226.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.


**CONFIDENTIAL
SALARIED EMPLOYEE CHANGE
OF STATUS FORM**

Requested by: Scott Blackwell Date Prepared: 1/2/12 Staff Req
 Nature of Request: New Hire Rehire Job Change Data Change Termination

Employee Name: Kevin Brittingham

Employee #: 190001

PRESENT		PROPOSED		
Location:	AAC	Effective Date:	12/21/2011	
Position Title:	Founder, Sales & Marketing Mgr	Location:		
SAP Position	50006585	Position Title:		
Cost Center #:	35355	SAP Position #:		
Present Annual Salary:	\$200,000	Cost Center #:		
Grade:	32	Proposed Annual Salary:	\$	
Salary Range:	\$ (in thousands)	\$ Min	\$ Mid	\$ Max
Last Increase Amount:	\$ _____	% _____		
Eff Date of Last Increase:		Supervised by:		
Supervised by:	Jason Schuble	Direct Reports:	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Attach List)	

COMMENTS:

IC PLAN: _____ % Effective Date: _____ Relocation: _____
 Sales Bonus: _____ % Effective Date: _____ Relo Amount: Full Package or \$ _____

NEW HIRE:	CHANGES:
Name of Person Replacing _____	
TERMINATION: Last Day Worked 12/21/11	Termination Date 12/21/11 Paid Through Date 12/31/11
Reason: INV-Discharge-Cause	Explanation: _____
<input type="checkbox"/> Leave of Absence (LOA) <input type="checkbox"/> Paid <input type="checkbox"/> Unpaid	Type of Leave: _____
Vacation: <input type="checkbox"/> Days <input type="checkbox"/> Hours – Eligible: _____ Used: _____ Owed: _____	

APPROVAL LEVEL	TITLE	PRINTED NAME	SIGNATURES	DATE
*Requested by:	Chief Officer	Scott Blackwell		1-3-12
*HR Review:	HR Manager	Oralia Johnson		
*Level I:				
*Level II:				
*Level III:	Benefits			
Compensation:	Director of Compensation	Mark Primm		1/4/12
CHRO:	CHRO	Melissa Cofield		

Advanced Armament
Corp.

EMERGENCY CONTACT
INFORMATION

Employee Name Kevin Brittingham

In the event of an emergency during normal working hours, the person listed below should be contacted:

Name Ken Brittingham

Relationship Father

Phone Number(s)

Home: 478-453-1337

Work: N/A

Cell: 770-377-9280



Employee Signature

10/3/09

Date



FREEDOM GROUP
FAMILY OF COMPANIES
EMPLOYMENT APPLICATION

As an EQUAL EMPLOYMENT OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER, Freedom Group Inc. ("FGI") does not discriminate against applicants or employees because of their age, race, color, national origin, sex (except where sex is a bona fide occupational qualification) or on any other basis prohibited by law. Furthermore, FGI will not discriminate against an applicant or employee because he or she is mentally or physically disabled, a disabled veteran, or a veteran of the Vietnam era, provided he or she is qualified and meets the requirements established by FGI for the job.

PLEASE PRINT OR TYPE CLEARLY			DATE 8/20/09
NAME (Last)	(First)	(Middle)	CELLULAR PHONE NUMBER (404) 886-7335
Brittingham	Kevin	Tyson	
CURRENT ADDRESS (Street)	(City)	(State)	(Zip Code)
2168 Town Manor Ct.	Dacula	GA	30019
HOME PHONE NUMBER (N/A)			
RESIDENT ADDRESS (Street) (If different from above)	(City)	(State)	(Zip Code)
			PHONE NUMBER ()
ARE YOU 18 YEARS OR OLDER <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF NOT, STATE YOUR DATE OF BIRTH _____			
TYPE OF POSITION DESIRED			
POSITION APPLIED FOR: CEO			
<input checked="" type="checkbox"/> FULL-TIME <input type="checkbox"/> PART-TIME <input type="checkbox"/> SUMMER <input type="checkbox"/> OTHER			SALARY EXPECTED 350,000
WILL YOU RELOCATE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	TO WHAT AREA?	WILL YOU TRAVEL? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	DATE AVAILABLE TO WORK Now
HAVE YOU EVER WORKED FOR FREEDOM GROUP INC? No		IF YES, WHEN AND WHERE?	

To comply with the Immigration Reform and Control Act of 1986, if you are hired you will be required to provide documents to establish your identity and your authorization to be employed in the United States. Such documents will be required within the first three (3) business days following your hire; or upon your first day of work if your employment period will be less than three (3) days.

HOW WERE YOU REFERRED TO FREEDOM GROUP INC?

Greg Baradat, Jason Schawble, Jesse Walcott

FGI employees

It is our policy to do a post offer drug screen for all jobs. Are you willing to take this test?
 YES NO

HAVE YOU EVER BEEN CONVICTED OF A CRIME (MISDEMANOR OR FELONY?) YES NO

IF YES, PLEASE EXPLAIN: (WHERE) (WHEN) (CHARGE) (SENTENCE)

N/A

(Disclosure of a criminal record will not necessarily disqualify you for employment. Each conviction will be evaluated on its own merits with respect to time, circumstances and seriousness, in relation to the job for which you are applying.)

RECORD OF EDUCATION

Names and Address of School	Dates Attended		Graduated		Type of Degree/ Diploma Received or Expected	Major/Minor Field of Study
	From	To				
	Mo/Yr	Mo/Yr	YES	NO		
High School (Last Attended) or GED: <u>Dacula High School</u> <u>Dacula, GA</u>			X			
College/Universities: <u>GA College</u> <u>Milledgeville, GA</u>	92	96	X		Undergrad	
Graduate School:						
Other (Business, Technical, Secretarial):						

LIST ANY CLUBS, ORGANIZATIONS, SOCIETIES, OR PROFESSIONAL GROUPS TO WHICH YOU BELONG WHICH HAVE A DIRECT BEARING UPON YOUR QUALIFICATIONS FOR THE JOB THAT YOU ARE SEEKING.

N/A

LIST ANY HOBBIES OR INTERESTS WHICH HAVE A DIRECT BEARING ON THE JOB FOR WHICH YOU ARE APPLYING.

N/A

LIST ANY SPECIAL SKILLS OR ABILITIES WHICH DIRECTLY RELATE TO THE JOB FOR WHICH YOU ARE APPLYING.

N/A

DO YOU POSSESS A VALID CURRENT DRIVER'S LICENSE (ONLY FOR JOBS REQUIRING DRIVING A VEHICLE)?

YES [] NO

DRIVER'S LICENSE NUMBER AND STATE 034885059 GA

MILITARY SERVICE RECORD

HAVE YOU EVER BEEN A MEMBER OF THE ARMED FORCES OF THE UNITED STATES? [] YES NO

IF YES, LIST ANY SPECIAL SKILLS OR ABILITIES YOU DEVELOPED WHILE IN MILITARY SERVICE WHICH DIRECTLY RELATE TO THE JOB WHICH YOU ARE APPLYING.

N/A

1. NAME AND ADDRESS OF EMPLOYER		STARTING POSITION	ENDING POSITION	
		SALARY		NAME AND TITLE OF SUPERVISOR
		Starting \$	Ending \$	
From Mo. ____ Yr. ____ TO Mo. ____ Yr.		REASON FOR LEAVING		May we contact Supervisor?
PHONE NUMBER Area Code ()				<input type="checkbox"/> Yes <input type="checkbox"/> No
Job Duties				
2. NAME AND ADDRESS OF EMPLOYER		STARTING POSITION	ENDING POSITION	
		SALARY		NAME AND TITLE OF SUPERVISOR
		Starting \$	Ending \$	
From Mo. ____ Yr. ____ TO Mo. ____ Yr.		REASON FOR LEAVING		
PHONE NUMBER Area Code ()				
Job Duties				
3. NAME AND ADDRESS OF EMPLOYER		STARTING POSITION	ENDING POSITION	
		SALARY		NAME AND TITLE OF SUPERVISOR
		Starting \$	Ending \$	
From Mo. ____ Yr. ____ TO Mo. ____ Yr.		REASON FOR LEAVING		
PHONE NUMBER Area Code ()				
Job Duties				

USE THIS SPACE TO INCLUDE ANY ADDITIONAL INFORMATION WHICH YOU FEEL MAY BE RELEVANT TO THE JOB FOR WHICH YOU ARE APPLYING.

This Application shall only remain active for 60 days. After 60 days, if you are still interested in employment at Freedom Group Inc., you must fill out a new application.

FREEDOM GROUP INC. EMPLOYEES OR APPLICANTS FOR EMPLOYMENT ARE SUBJECT TO TESTING FOR DRUG USE, INCLUDING MARIJUANA.

Offers of employment for some classifications are conditioned upon the results of a physical examination given by a representative of the Company's medical staff.

I hereby certify that all statements made in this application and interview(s) are true and correct to the best of my knowledge and belief. I understand and agree that any false or misleading information or omission of facts given in my application or interview(s) may be justification for refusal to hire or termination of employment.

I further understand that an investigative report may be made as to my character and general reputation. I authorize all past employers, schools, persons and organizations including, but not limited to, law enforcement agencies and licensing agencies, having relevant information or knowledge to provide it to FGI or its duly authorized representative for its use in deciding whether or not to offer me employment and specifically waive any required written notification. I hereby release employers, schools, persons and organizations from all liability in responding to inquiries in connection with my application. Upon written request by me, within a reasonable period of time, FGI will make available to me the nature and scope of all reports of every type obtained.

I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between Freedom Group Inc., its subsidiaries and affiliates, and me for either employment or for the providing of a benefit. If an employment relationship is established, I understand and acknowledge that it is of an "at will" nature, which means that my employment can be terminated at any time, with or without cause, at the option of either FGI or myself. I further understand that this "at will" employment relationship cannot be changed by any written document or conduct unless such change is specifically authorized in writing by an authorized officer of FGI.

In signing this form, I certify that I understand all the questions and statements in this application.

Further, if granted a position with Freedom Group Inc., or any of its subsidiaries or affiliates, I will comply with all its rules and regulations, including the Business Conduct Policy and Non-Disclosure Agreement.


SIGNATURE OF APPLICANT

08/20/09
DATE

FOR HUMAN RESOURCES USE ONLY

DATE APPLICATION RECEIVED	REFERRAL SOURCE
INTERVIEWED BY	DEPARTMENT
REFERENCE CHECK COMPLETED (DATE AND BY WHOM)	
DISPOSITION AND REASON	

FAX PAGES 1 AND 2 OF THE AUTHORIZATION RELEASE TO (440) 205-8355 (along with an application and/or resume)

**NOTICE AND ACKNOWLEDGMENT
AUTHORIZATION RELEASE**

[IMPORTANT -- PLEASE READ CAREFULLY BEFORE SIGNING ACKNOWLEDGMENT]

NOTICE REGARDING BACKGROUND INVESTIGATION

Employer ("the Company") may obtain information about you from a consumer reporting agency for employment purposes. Thus, you may be the subject of a "consumer report" and/or an "investigative consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living, and which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may contain information regarding your credit history, criminal history from various state, private and insurance sources along with other public records available, social search, motor vehicle records ("driving records"), verification of your education or employment history, or workers' compensation claims. Workers compensation will only be requested in compliance with the ADA and/or any other applicable state laws. These reports may be obtained at any time after receipt of your authorization and, if you are hired, throughout your employment. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report. Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for employment is an investigation into your education and/or employment history conducted by BackTrack, Inc., 8850 Tyler Boulevard, Mentor, OH 44060, or another outside organization. The scope of this notice and authorization is all-encompassing, however, allowing Employer to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and, if you are hired, throughout the course of your employment to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report. According to the Fair Credit Reporting Act, you are entitled to know if employment is denied or you otherwise suffer an adverse employment action because of information obtained from your prospective employer/employer from a consumer reporting agency. If so, you will be advised and be given the name of the agency or source of information.

New York applicants or employees only: You have the right to inspect and receive a copy of any investigative consumer report requested by Employer by contacting the consumer reporting agency identified above directly.

ACKNOWLEDGMENT AND AUTHORIZATION

I acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" at any time after receipt of this authorization and, if I am hired, throughout my employment. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, Employer, or insurance company to furnish any and all background information requested by BackTrack, Inc., another outside organization acting on behalf of Employer, and/or Employer itself. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

Minnesota and Oklahoma applicants or employees only: Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Company

California applicants or employees only: By signing below, you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW. Please check this box if you would like to receive a copy of an investigative consumer report or consumer credit report if one is obtained by the Company at no charge whenever you have a right to receive such a copy under California law.

Have you been convicted of an adult felony crime in the last seven (7) years? You are not obligated to disclose sealed, annulled or expunged convictions or convictions pardoned by the governor. Please be aware that a criminal conviction will not necessarily be a bar to employment and will be considered as it relates to the job in question. Failure to honestly and completely answer this question (other than as described below) will result in discontinued consideration of the application or termination of employment.

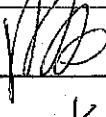
If you are a candidate residing or applying for a position in California, Georgia, or Hawaii please note the limitations on the scope of this inquiry as follows:

1. **CALIFORNIA candidates and residents only:** Excluded from this inquiry are the following:
 - Convictions for which the records have been judicially sealed, expunged or statutorily eradicated.
2. **GEORGIA candidates and residents only:** Excluded from this inquiry are convictions discharged under the First Offender's Law.
3. **HAWAII candidates and residents only:** Only if you are given an offer of employment, will you be required to answer this question. Otherwise, you do not have to complete this section.

YES NO. If YES, please indicate county and state where convicted.

Date convicted / /

F06-1085061110

Signature 

Date 8/20/09

Printed Name Kevin Brittingham

Company Applying To FREEDOM GROUP INC.

BackTrack
EMPLOYMENT SCREENING SPECIALISTS

8850 Tyler Blvd., Mentor, OH 44060 Phone (440) 205-8280 Fax (440) 205-8355
Visit our website at: www.backtracker.com or email us at: bti@backtracker.com

FAX PAGES 1 AND 2 OF THE AUTHORIZATION RELEASE TO (440) 205-8355 (along with an application and/or resume)

**NOTICE AND ACKNOWLEDGMENT
AUTHORIZATION RELEASE (Continued from Page 1)**

BackTrack, Inc. is an employment screening company that conducts background checks on prospective employees/employees for our clients as part of their standard hiring procedure. In order to perform this check, we need you to provide the following information. Please be sure to fill out this form completely and legibly.

APPLICANT INFORMATION (please print clearly & accurately)					
Last Name <i>Birmingham</i>	First Name <i>Kevin</i>	Middle Name <i>Tyson</i>			
Maiden Name <i>N/A</i>	Any Other Name(s) Used		Phone (404) 886-7335		
Home Address <i>2168 Town Manor Ct.</i>			E-Mail Address <i>kevin@advanced-armament.com</i>		
City <i>Dacula</i>	State <i>GA</i>	Zip <i>30019</i>	County <i>Gwinnett</i>	From Mth/Yr <i>2/09</i>	To Mth/Yr <i>Now</i>
Social Security Number <i>252 31 4432</i>			Date of Birth * <i>01/13/74</i>		
List Previous Addresses (to cover last 7 years) Address <i>2044 Lenox Cove CIR</i>			City/State <i>Atlanta GA</i>	Zip <i>30319</i>	
County <i>DeKalb</i>			From Mth/Yr <i>11/05</i>	To Mth/Yr <i>2/09</i>	
Address <i>1367 Oak Bend Way</i>			City/State <i>Lawrenceville GA</i>	Zip <i>30045</i>	
County <i>Gwinnett</i>			From Mth/Yr <i>1999-2000</i>	To Mth/Yr <i>11/05</i>	
Address			City/State	Zip	
County			From Mth/Yr	To Mth/Yr	

NOTE: The absence of any of the above information could result in a delay in processing your background. If necessary, a representative from BackTrack, Inc. will contact you for additional information in order to expedite the background process. Thank you for your assistance.

--FOR CLIENT USE ONLY – DO NOT WRITE BELOW THIS LINE--

CLIENT INFORMATION		SERVICES REQUESTED
Name:		
Title:	SERVICES REQUESTED:	
E-Mail Address:		
Company Name: REMINGTON ARMS CO.		
Address:	Comments:	
City/State/Zip:		
If Applicable, Division or Code #:		
Phone Number:		
Fax Number:		

F06-1005/061110

8850 Tyler Blvd., Mentor, OH 44060 Phone (440) 205-8280 Fax (440) 205-8355
Visit our website at: www.backtracker.com or email us at: bti@backtracker.com

*This information will be used for background screening purposes only and will not be used as hiring criteria.

BackTrack
EMPLOYMENT SCREENING SPECIALISTS

Para información en español, visite www.ftc.gov/credit o escriba a la FTC Consumer Response Center, Room 130-A 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. For more information, including information about additional rights, go to www.ftc.gov/credit or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.

You must be told if information in your file has been used against you. Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment - or to take another adverse action against you - must tell you, and must give you the name, address, and phone number of the agency that provided the information.

You have the right to know what is in your file. You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:

- a person has taken adverse action against you because of information in your credit report;
- you are the victim of identity theft and place a fraud alert in your file;
- your file contains inaccurate information as a result of fraud;
- you are on public assistance;
- you are unemployed but expect to apply for employment within 60 days.

In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.ftc.gov/credit for additional information.

You have the right to ask for a credit score. Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.

You have the right to dispute incomplete or inaccurate information. If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.ftc.gov/credit for an explanation of dispute procedures.

Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information. Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

Consumer reporting agencies may not report outdated negative information. In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

Access to your file is limited. A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.

You must give your consent for reports to be provided to employers. A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.ftc.gov/credit.

You may limit "prescreened" offers of credit and insurance you get based on information in your credit report. Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 888-5-OPT-OUT (888-567-8688) or www.optoutprescreen.com.

You may seek damages from violators. If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.

Identity theft victims and active duty military personnel have additional rights. For more information, visit www.ftc.gov/credit.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:

TYPE OF BUSINESS:	CONTACT:
Consumer reporting agencies, creditors and others not listed below	Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 877-382-4357
National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 202-452-3693
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name)	Office of Thrift Supervision Consumer Complaints Washington, DC 20552 800-842-6929
Federal credit unions (words "Federal Credit Union" appear in institution's name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 703-519-4600
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Consumer Response Center, 2345 Grand Avenue, Suite 100 Kansas City, Missouri 64108-2638 877-275-3342
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation, Office of Financial Management Washington, DC 20590 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator – GIPSA Washington, DC 20250 202-720-7051

**NOTICE REGARDING BACKGROUND INVESTIGATION
PURSUANT TO CALIFORNIA LAW**

Employer (the "Company") intends to obtain information about you from an investigative consumer reporting agency and/or a consumer credit reporting agency for employment purposes. Thus, you can expect to be the subject of "investigative consumer reports" and "consumer credit reports" obtained for employment purposes. Such reports may include information about your character, general reputation, personal characteristics and mode of living. With respect to any investigative consumer report from an investigative consumer reporting agency ("ICRA"), the Company may investigate the information contained in your employment application and other background information about you, including but not limited to obtaining a criminal record report, verifying references, work history, your social security number, your educational achievements, licensure, and certifications, your driving record, and other information about you, and interviewing people who are knowledgeable about you. The results of this report may be used as a factor in making employment decisions. The source of any investigative consumer report (as that term is defined under California law) will be Back Track, Inc., 8850 Tyler Boulevard, Mentor, OH 44060, 800-991-9694. The source of any credit report will be Back Track, Inc., 8850 Tyler Boulevard, Mentor, OH 44060, 800-991-9694.

The Company agrees to provide you with a copy of an investigative consumer report when required to do so under California law.

Under California Civil Code section 1786.22, you are entitled to find out from an ICRA what is in the ICRA's file on you with proper identification, as follows:

- In person, by visual inspection of your file during normal business hours and on reasonable notice. You also may request a copy of the information in person. The ICRA may not charge you more than the actual copying costs for providing you with a copy of your file.
- A summary of all information contained in the ICRA's file on you that is required to be provided by the California Civil Code will be provided to you via telephone, if you have made a written request, with proper identification, for telephone disclosure, and the toll charge, if any, for the telephone call is prepaid by or charged directly to you.
- By requesting a copy be sent to a specified addressee by certified mail. ICRA's complying with requests for certified mailings shall not be liable for disclosures to third parties caused by mishandling of mail after such mailings leave the ICRA's.

"Proper Identification" includes documents such as a valid driver's license, social security account number, military identification card, and credit cards. Only if you cannot identify yourself with such information may the ICRA require additional information concerning your employment and personal or family history in order to verify your identity.

The ICRA will provide trained personnel to explain any information furnished to you and will provide a written explanation of any coded information contained in files maintained on you. This written explanation will be provided whenever a file is provided to you for visual inspection.

You may be accompanied by one other person of your choosing, who must furnish reasonable identification. An ICRA may require you to furnish a written statement granting permission to the ICRA to discuss your file in such person's presence.



**VOLUNTARY APPLICANT
DATA RECORD**

Remington Arms Company, Inc. is an Equal Opportunity Employer. As required by law, we must record certain information in order to comply with our Affirmative Action Program.

We do not discriminate in our hiring or employment practices on the basis of race, color, national origin, age, religion, disability status, veteran status, gender, sexual orientation, marital status or any other protected status as governed by federal, state and local laws.

Various government agencies request statistical information regarding our hiring practices. Your cooperation in providing this information is completely voluntary. Any information gathered is strictly confidential and refusal to provide this information will have no bearing on your employment application and will not subject you to any adverse treatment.

If you choose to provide this information, we appreciate your cooperation.

Name Kevin Brittingham Date 08/20/09

I choose not to disclose any information

Race or Ethnic Identity

Gender

- | | |
|--|--|
| <input type="checkbox"/> Hispanic or Latino | <input type="checkbox"/> Female |
| <input checked="" type="checkbox"/> White (not Hispanic or Latino) | <input checked="" type="checkbox"/> Male |
| <input type="checkbox"/> Black or African American
(not Hispanic or Latino) | <input type="checkbox"/> I choose not to
disclose |
| <input type="checkbox"/> Native Hawaiian or Pacific Islander
(not Hispanic or Latino) | |
| <input type="checkbox"/> Asian (not Hispanic or Latino) | |
| <input type="checkbox"/> American Indian or Alaskan Native
(not Hispanic or Latino) | |
| <input type="checkbox"/> Two or More Races (not Hispanic or Latino) | |
| <input type="checkbox"/> I choose not to disclose | |

FAX

LABORATORY REPORT

Quest
Diagnostics30014864 AREA/ROUTE/STOP: XXXXXXX
REMINGTON ARMS COMPANY2592 ARKANSAS HWY 15N
LONOKE, AR 72086

PARTICIPANT NAME		PARTICIPANT ID	ROOM NO.	AGE	SEX	PHYSICIAN
PAGE	REQUISITION NO.	ACCESSION NO.	LAB REF. #	COLLECTION DATE & TIME		
1	3056609	435578G		09212009 03:03PM	09222009	09232009 3:45AM

REMARKS Client Site Location:

REASON FOR TEST: PRE-EMPLOYMENT

DONOR ID VERIFIED: PHOTO I.D.

REPORT STATUS	FINAL	TEST	RESULT		UNITS	REFERENCE RANGE	SITE CODE
			IN RANGE	OUT OF RANGE			
REPORT FOR:		REMINGTON ARMS COMPANY - 2592 ARKANSAS HWY 15N LONOKE, AR 72086			30014864		
Tests Ordered:	20910N (POCT SAP-9 TESTSURE)						
Integrity Checks						Acceptable Range	
CREATININE		213.2 mg/dL				>/= 20 mg/dL	
OXIDIZING ADULTERANTS		Negative					
pH		6.9				4.5-8.9	
Substance Abuse Panel					Initial Test Level	GC/MS Confirm Test Level	
AMPHETAMINES		Negative			1000 ng/mL	500 ng/mL	
BARBITURATES		Negative			300 ng/mL	200 ng/mL	
BENZODIAZEPINES		Negative			300 ng/mL	200 ng/mL	
COCAINE METABOLITES		Negative			300 ng/mL	150 ng/mL	
MARIJUANA METABOLITES		Negative			50 ng/mL	15 ng/mL	
METHADONE		Negative			300 ng/mL	200 ng/mL	
OPIATES		Negative			2000 ng/mL	2000 ng/mL	
PHENCYCLIDINE		Negative			25 ng/mL	25 ng/mL	
PROPOXYPHENE		Negative			300 ng/mL	200 ng/mL	
CERTIFYING SCIENTIST:	Lysaida Moore						
SPECIMEN RECEIVED AND PROCESSED IN THE ATLANTA		DHHS CERTIFIED LABORATORY					
LAB:	Quest Diagnostics-Atlanta (NIDA) 3175 Presidential Dr. Atlanta GA 30340						
		>> END OF REPORT <<					

Form G-4 (Rev. 10/06)

STATE OF GEORGIA
EMPLOYEE'S WITHHOLDING ALLOWANCE CERTIFICATE

1a. YOUR FULL NAME <i>Kevin Tyson Brittingham</i>	1b. YOUR SOCIAL SECURITY NUMBER <i>252-31-4432</i>
2a. HOME ADDRESS (Number, Street, or Rural Route) <i>2168 Town Manor Ct.</i>	2b. CITY, STATE AND ZIP CODE <i>Dacula, GA 30019</i>

READ INSTRUCTIONS ON REVERSE SIDE BEFORE COMPLETING THIS FORM

3. MARITAL STATUS (If you do not wish to claim an allowance, enter "0" in the brackets beside your marital status.)

A. Single: enter 0 or 1 []

4. DEPENDENT ALLOWANCES []

B. Married Filing Joint, both spouses working: enter 0 or 1 or 2 []

5. ADDITIONAL ALLOWANCES []

(complete worksheet below)

C. Married Filing Joint, one spouse working: enter 0 or 1 or 2 []

D. Married Filing Separate: enter 0 or 1 or 2 []

E. Head of Household: enter 0 or 1 or 2 []

6. ADDITIONAL WITHHOLDING \$ _____

WORKSHEET FOR CALCULATING ADDITIONAL ALLOWANCES

This worksheet must be completed if Line 5 is greater than zero.

1. COMPLETE THIS LINE ONLY IF USING STANDARD DEDUCTION:

Yourself: Age 65 or over BlindSpouse: Age 65 or over Blind Number of boxes checked _____ x 1300 = \$ _____

2. ADDITIONAL ALLOWANCES FOR DEDUCTIONS:

A. Estimated Federal Itemized Deductions \$ _____

B. Georgia Standard Deduction (enter one): Single/Head of Household \$2,300
Each Spouse \$1,500 \$ _____

C. Subtract Line B from Line A \$ _____

D. Allowable Deductions to Federal Adjusted Gross Income \$ _____

E. Add the Amounts on Lines 1, 2C, and 2D \$ _____

F. Estimate of Taxable Income not Subject to Withholding \$ _____

G. Subtract Line F from Line E (if zero or less, stop here) \$ _____

H. Divide the Amount on Line G by \$3,000. Enter total here and on Line 5 above \$ _____

This is the maximum number of additional allowances you can claim. If the remainder is over \$1,500 round up.

7. LETTER USED (Marital Status A, B, C, D, or E) C TOTAL ALLOWANCES (Total of Lines 3 - 5) 3
(Employer: The letter indicates the tax tables in the Employer's Tax Guide)

8. EXEMPT: Skip this line if you entered information on Lines 3 - 7. Read the Instructions for Line 8 on page 2.

I claim exemption from withholding because I incurred no Georgia income tax liability last year and I do not expect to have a Georgia income tax liability this year. Check here

I certify under penalty of perjury that I am entitled to the number of withholding allowances or the exemption from withholding status claimed on this Form G-4. Also, I authorize my employer to deduct per pay period the additional amount listed above.

Employee's Signature WB Date 10/3/09Employer: Complete Line 9 and mail entire form only if the employee claims over 14 allowances or exempt from withholding. If necessary, mail form to: Georgia Department of Revenue, Withholding Tax Unit, P. O. Box 49432, Atlanta, GA 30369.

9. EMPLOYER'S NAME AND ADDRESS:

EMPLOYER'S FEIN: _____

EMPLOYER'S WH#: _____

Do not accept forms claiming additional allowances unless the worksheet has been completed. Do not accept forms claiming exempt if numbers are written on Lines 3 - 7.

Form W-4 (2009)

Purpose. Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Consider completing a new Form W-4 each year and when your personal or financial situation changes.

Exemption from withholding. If you are exempt, complete only lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2009 expires February 16, 2010. See Pub. 505, Tax Withholding and Estimated Tax.

Note. You cannot claim exemption from withholding if (a) your income exceeds \$950 and includes more than \$300 of unearned income (for example, interest and dividends) and (b) another person can claim you as a dependent on their tax return.

Basic Instructions. If you are not exempt, complete the **Personal Allowances Worksheet** below. The worksheets on page 2 further adjust your withholding allowances based on itemized deductions, certain credits, adjustments to income, or two-earner/multiple job situations.

Complete all worksheets that apply. However, you may claim fewer (or zero) allowances. For regular wages, withholding must be based on allowances you claimed and may not be a flat amount or percentage of wages.

Head of household. Generally, you may claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals. See Pub. 501, Exemptions, Standard Deduction, and Filing Information, for information.

Tax credits. You can take projected tax credits into account in figuring your allowable number of withholding allowances. Credits for child or dependent care expenses and the child tax credit may be claimed using the **Personal Allowances Worksheet** below. See Pub. 919, How Do I Adjust My Tax Withholding, for information on converting your other credits into withholding allowances.

Nonwage income. If you have a large amount of nonwage income, such as interest or

dividends, consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you may owe additional tax. If you have pension or annuity income, see Pub. 919 to find out if you should adjust your withholding on Form W-4 or W-4P.

Two earners or multiple jobs. If you have a working spouse or more than one job, figure the total number of allowances you are entitled to claim on all jobs using worksheets from only one Form W-4. Your withholding usually will be most accurate when all allowances are claimed on the Form W-4 for the highest paying job and zero allowances are claimed on the others. See Pub. 919 for details.

Nonresident alien. If you are a nonresident alien, see the instructions for Form 8233 before completing this Form W-4.

Check your withholding. After your Form W-4 takes effect, use Pub. 919 to see how the amount you are having withheld compares to your projected total tax for 2009. See Pub. 919, especially if your earnings exceed \$130,000 (Single) or \$180,000 (Married).

Personal Allowances Worksheet (Keep for your records.)

- A Enter "1" for **yourself** if no one else can claim you as a dependent. A _____
- B Enter "1" if: {
 - You are single and have only one job; or
 - You are married, have only one job, and your spouse does not work; or
 - Your wages from a second job or your spouse's wages (or the total of both) are \$1,500 or less.} B _____
- C Enter "1" for **your spouse**. But, you may choose to enter "-0-" if you are married and have either a working spouse or more than one job. (Entering "-0-" may help you avoid having too little tax withheld.) C _____
- D Enter number of **dependents** (other than your spouse or yourself) you will claim on your tax return D _____
- E Enter "1" if you will file as **head of household** on your tax return (see conditions under **Head of household** above) E _____
- F Enter "1" if you have at least \$1,800 of **child or dependent care expenses** for which you plan to claim a credit
(Note. Do not include child support payments. See Pub. 503, Child and Dependent Care Expenses, for details.) F _____
- G **Child Tax Credit** (including additional child tax credit). See Pub. 972, Child Tax Credit, for more information.
 - If your total income will be less than \$61,000 (\$90,000 if married), enter "2" for each eligible child; otherwise "1" if you have three or more eligible children.
 - If your total income will be between \$61,000 and \$84,000 (\$90,000 and \$119,000 if married), enter "1" for each eligible child plus "1" additional if you have six or more eligible children. G _____
- H Add lines A through G and enter total here. *(Note. This may be different from the number of exemptions you claim on your tax return.)* ► H _____
- For accuracy, complete all worksheets that apply. {
 - If you plan to itemize or claim adjustments to income and want to reduce your withholding, see the **Deductions and Adjustments Worksheet** on page 2.
 - If you have more than one job or are married and you and your spouse both work and the combined earnings from all jobs exceed \$40,000 (\$25,000 if married), see the **Two-Earners/Multiple Jobs Worksheet** on page 2 to avoid having too little tax withheld.
 - If neither of the above situations applies, stop here and enter the number from line H on line 5 of Form W-4 below.}

Cut here and give Form W-4 to your employer. Keep the top part for your records.

W-4
Form
Department of the Treasury
Internal Revenue Service

Employee's Withholding Allowance Certificate

OMB No. 1545-0074

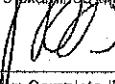
2009

► Whether you are entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS.

1 Type or print your first name and middle initial. Kevin T.	Last name Brittingham	2 Your social security number 252 31 4432
Home address (number and street or rural route) 2168 Town Manor Ct.		3 <input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Married, but withhold at higher single rate. Note. If married, but legally separated, or spouse is a nonresident alien, check the "Single" box.
City or town, state, and ZIP code Dacula, GA 30019		4 If your last name differs from that shown on your social security card, check here. You must call 1-800-772-1213 for a replacement card. ► <input type="checkbox"/>
5 Total number of allowances you are claiming (from line H above or from the applicable worksheet on page 2) 5 3		
6 Additional amount, if any, you want withheld from each paycheck 6 \$		
7 I claim exemption from withholding for 2009, and I certify that I meet both of the following conditions for exemption. <ul style="list-style-type: none"> • Last year I had a right to a refund of all federal income tax withheld because I had no tax liability and • This year I expect a refund of all federal income tax withheld because I expect to have no tax liability. If you meet both conditions, write "Exempt" here ► 7		

Under penalties of perjury, I declare that I have examined this certificate and to the best of my knowledge and belief, it is true, correct, and complete.

Employee's signature

(Form is not valid unless you sign it.) ► 

Date ► **10/3/09**

8 Employer's name and address (Employer: Complete lines 8 and 10 only if sending to the IRS.)

9 Office code (optional)

10 Employer identification number (EIN)

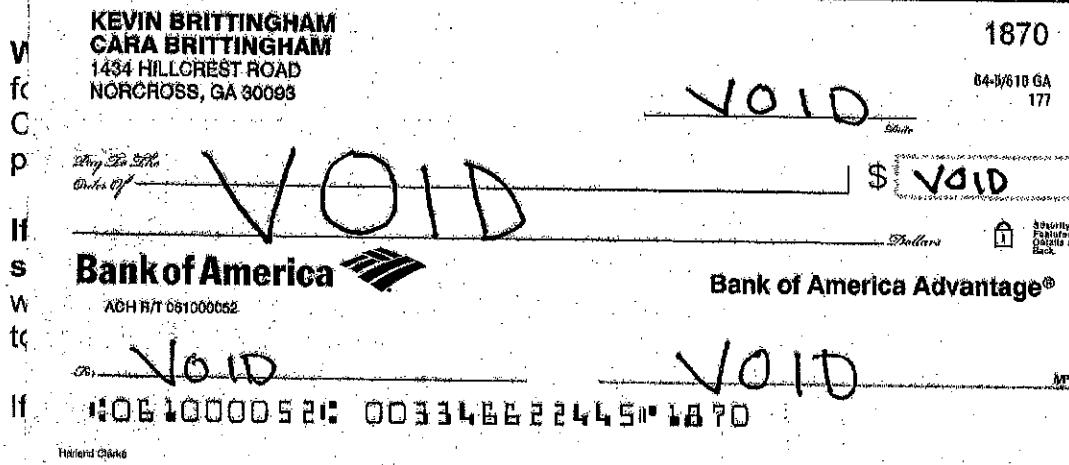
Advanced Armament Corp.

Payroll Check Direct Deposit

As a service to AAC employees, you can have your payroll check deposited directly into your bank account. The major banks will accept electronic transfer of funds. However, if you bank at one of the smaller institutions, please contact them before you choose this service.

Availability of Funds: Funds directly deposited will be available to you at the beginning of your bank's business day on the date of your pay check.

Check Stubs: You will continue to receive a check stub each pay period with your payroll in



Payroll Check Direct Deposit Authorization Form

Please complete the following information and return to the Payroll Department.

New Authorization Change Cancellation

For new authorizations and changes, **please attach a voided blank check** with your checking account number and the bank number.

I hereby authorize the Remington Arms Payroll Department to have my payroll check directly deposited to my bank account.

Signature

Employee #

Date

Advanced Armament Corp.

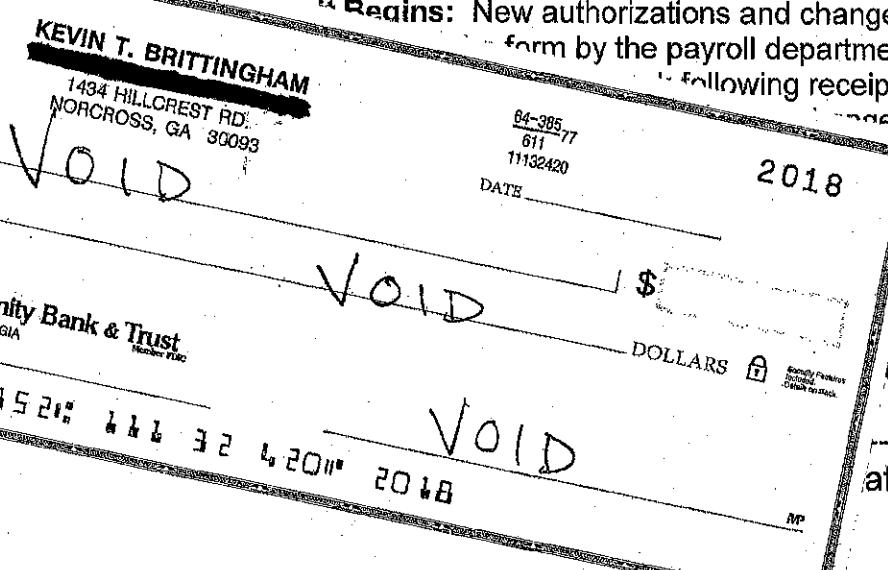
Payroll Check Direct Deposit

As a service to AAC employees, you can have your payroll check deposited directly into your bank account. The major banks will accept electronic transfer of funds. However, if you bank at one of the smaller institutions, please contact them before you choose this service.

Availability of Funds: Funds directly deposited will be available to you at the beginning of your bank's business day on the date of your pay check.

Check Stubs: You will continue to receive a check stub each pay period with your payroll information and the amount of your deposit.

Begins: New authorizations and changes will take approximately 1-2 weeks for the payroll department to become effective.
Changes: Changes made on this form will take effect the following receipt of the form. It takes one business day for the change to take effect.



or payroll check will be
changed. For example, if you
change your old account and be sent
to a new account.

Payroll Department.

Application Form

Payroll Department.

Please complete the following information and attach to application form and return to Payroll Department.

New Authorization Change Cancellation

For new authorizations and changes, **please attach a voided blank check** with your checking account number and the bank number.

I hereby authorize the Remington Arms Payroll Department to have my payroll check directly deposited to my bank account.

Signature

Employee #

Date

10/3/09

**ADVANCED ARMAMENT
CORP.**

**PROPRIETARY INFORMATION
PROTECTION PLAN**

**EMPLOYEE DECLARATION OF OWNERSHIP OF WORK
AND NON-DISCLOSURE AGREEMENT**

This Agreement is entered into this 3 day of October, 2009, by Kevin Bruttingham (hereinafter referred to as "Employee"), in consideration for, and as part of the obligations associated with, the position of employment held by Employee with **ADVANCED ARMAMENT CORP.** (hereinafter referred to as the "Company").

WITNESSETH:

WHEREAS, in its business, Company has developed and uses commercially valuable technical and non-technical information, and, to guard the legitimate interests of Company, it is necessary for Company to protect certain of the information either by patents or by holding it secret or confidential; and

WHEREAS, the aforesaid information is vital to the success of Company's business, and Employee through his or her activities may become acquainted therewith, and may contribute thereto either through inventions, discoveries, improvements or otherwise;

NOW, THEREFORE, Employee agrees as follows:

1. Employee shall not directly or indirectly, without the Company's express written consent, furnish or offer to furnish, disclose or offer to disclose, to any third party, or use for Employee's own or another's benefit, any information, knowledge or data of any nature, including trade secrets or other confidential information relating to products, processes, know-how, machines, software, systems, designs, drawings, formulas, test data, customers, vendor lists, litigation, or other matters pertaining to the business of the Company, consultants, licensees, affiliates of the Company or any joint venture in which the Company is a participant, whether or not any such information, knowledge or data of any nature, is developed by Employee, except as required in Employee's duties to Company, unless such information is generally publicly known and in the public domain, other than through any breach of this Agreement. Employee agrees and acknowledges that Employee's obligations and commitments under this Agreement shall survive the term of employment and shall continue for a period of one (1) year thereafter.
2. Employee shall disclose promptly to Company or its nominee any and all inventions, discoveries and improvements conceived of or made by Employee during the period of employment and related to the business or activities of Company. All technical information, manuscripts, financial plans, reports, collected data, research, computer

DECLARATION OF OWNERSHIP- NON-DISCLOSURE AGREEMENT

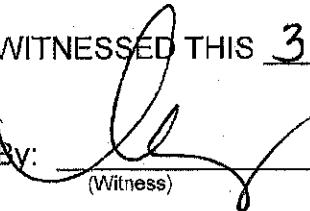
software, analyses, notes, and other information, documents and materials of any nature whatsoever (collectively referred to as "work"), prepared, in whole or in part, by Employee pursuant to, or in connection with, his or her employment with the Company shall be the sole property of the Company. Employee shall, and hereby does, assign to the Company all right, title and interest in any copyrights, patents, know-how or other proprietary rights with respect to such work prepared pursuant to, or in connection with, said employment and agrees to assist the Company to secure appropriate legal protection of any such work. Such assistance shall include, upon request of the Company, prompt execution of all documentation necessary for the Company to protect and enforce its rights. These obligations shall continue beyond the termination of employment with respect to inventions, discoveries and improvements conceived of or made by Employee during the period of employment, and shall be binding upon Employee's assigns, executors, administrators and other legal representatives.

3. Upon termination of employment, Employee shall promptly deliver to Company all drawings, blueprints, manuals, letters, notes, notebooks, reports and all other materials of a secret or confidential nature relating to Company's business and which are in the possession or under the control of Employee.
4. Throughout the duration of employment with the Company or an affiliate, Employee will execute on a periodic basis, if requested by the Company, an Employee Declaration of Ownership of Work and Non-Disclosure Agreement to emphasize the importance of the commitments undertaken herein. Failure to execute any future Declaration of Ownership of Work and Non-Disclosure shall in no way excuse or release, or be argued to excuse or release, Employee from the obligations and commitments set forth herein.

IN WITNESS WHEREOF, Employee has agreed to and duly executed this Agreement as of the date written above.

By: 
(Employee)

WITNESSED THIS 3 DAY OF October, 2009

By: 
(Witness)

Computer/Network Acceptable Use Policy

Agreement

I have read and understand the Company's Computer/Network Acceptable Use Policy.

As a user of the Company's Systems, I hereby agree to use the Company's Systems in a professional and business-like manner consistent with all applicable laws, rules, regulations and the Company's Computer/Network Acceptable Use Policy.

I understand and agree that the Company is authorized to monitor Systems use and conduct tests to monitor employee compliance to this Policy, with or without notice to the employee. This includes the right to retrieve, review, audit, intercept, access, examine, and disclose any data or information stored on or transmitted by any of the Company's Systems.

I FURTHER UNDERSTAND THAT A VIOLATION OF COMPANY'S COMPUTER/NETWORK ACCEPTABLE USE POLICY OR APPLICABLE LAW, RULE OR REGULATION MAY RESULT IN DISCIPLINARY ACTION BEING TAKEN AGAINST ME UP TO AND INCLUDING TERMINATION OF EMPLOYMENT.



Signature

Kevin Brittingham

Print Name

10/3/09

Date

Advanced Armament Corp.

COMPUTER NETWORK ACCEPTABLE USE POLICY

This Policy applies to all employees of Advanced Armament Corp. ("AAC" or "Company"). It does not constitute an employment contract, nor is it intended to make commitments to employees concerning their employment with the Company.

This Policy is in effect at the time of publication and, with the exception of the at-will nature of employment, any and all Policies may be changed at any time by the Company. Ideally, employees will be notified in advance of significant Policy changes. However, employees should understand that Policy changes may be made without notice. Policies cannot be modified by implication, conduct or statements, either oral or written, regardless of the source. Modifications must be approved by both the Chief Executive Officer and the Chief Financial Officer Advanced Armament Corp.

POLICY OVERVIEW

This Policy is in place to protect Company Systems assets from misuse, to maintain the confidentiality, and to ensure the integrity and security of Company information and Systems.

"Systems" refer to all Company owned hardware, software, voice/data network, and communication assets.

"Systems" also include all data or information (without limitation) that either resides on or is exchanged using Company owned hardware, software, voice/data network, and communication assets.

AAC's Systems are designed and intended for business use and all data and information (without limitation) that either resides on or is exchanged using Company owned hardware, software, voice/data network, and communication assets is the property of AAC.

Employees are responsible for any information that comes into their control and must ensure that it is adequately protected against unauthorized disclosure, modification, destruction, or use for which it was not intended. As such, Employees are responsible for ensuring that Systems are used according this Policy and other Company Policies, in pursuit of Company business objectives, and consistent with the Company operating procedures.

ENFORCEMENT

EMPLOYEES IN ANYTHING THEY CREATE, SHOULD NOT HAVE AN EXPECTATION OF PRIVACY STORE, SEND OR RECEIVE ON THE SYSTEMS. The Information Technology Department, under the direction of the Chief Information Officer and with approval of the Vice President of Human Resources, is authorized to monitor computer use and conduct tests to monitor employee compliance to this Policy, with or without notice to the employee. This includes the right to retrieve, review, audit, intercept, access, examine, and disclose any data or information stored on or transmitted by any of the Company's

Systems for any purpose.

The Company reserves the right, in its sole discretion, to restrict access via Internet Filters to Web Sites containing materials with inappropriate content. Examples of content the Company may consider inappropriate include, but are not limited to: sex, drugs, hate speech, criminal skills, cults, gaming, gambling or other extreme, gross or indecent content.

Non-compliance with this Policy can pose significant business and other risks for the Company including adverse impact to Company operations, corruption or loss of data, loss or compromise of Company intellectual property and trade secrets and possible damage to Company assets and reputation. It is the responsibility of each employee to report any known or suspected improper use of the Company computer/network or similar Systems to their manager, Chief Information Officer, Vice President-Human Resources, or the General Counsel.

COMPUTER/NETWORK ACCEPTABLE USE POLICIES

All employees have the responsibility to use all Systems resources in a professional, ethical and lawful manner. It is the strict policy of AAC that it will not tolerate any use of the computer and network systems which create, either intentionally or unintentionally, a hostile or offensive work environment based on race, gender, nationality, culture, religion, sexual orientation, age, disability or any other personal characteristics.

Employees will not access or attempt to access data, software or systems other than he/she has been authorized or engage in any deliberate activity which might enable unauthorized access to the Company's information assets or gain unauthorized access to resources of other companies or entities.

Employees will not attempt to circumvent any security controls or do anything intentionally to degrade the performance of the Systems.

Unless specifically authorized, employees will not disclose any information outside the Company related to the security controls or other technologies that are in use or the way in which they are implemented.

Employees must not deliberately perform acts that waste computer resources or unfairly monopolize resources to the exclusion of other employees. These acts include, but are not limited to, sending mass mailings or chain letters, subscribing to non-business related list servers and mailing lists, spending excessive amounts of time on the Internet, playing games, engaging in online chat groups or sessions, printing multiple copies of documents, or otherwise creating unnecessary network traffic.

All employees are required to adhere to the current Company standards for software and associated software updates on the Company's Systems. This includes, but is not limited to, virus software, operating system (e.g. Microsoft Windows XP), Company provided patches, virus updates, and maintenance releases when made available. If there is uncertainty of the Company standards, it is the Employee's responsibility to contact the Information Technology Department.

To protect Company information resources from loss or damage, employees are responsible for ensuring that business critical information on their Systems are backed up. Contact a Systems administrator if assistance is required.

E-MAIL

Company e-mail accounts are provided to employees primarily for business purposes, but limited and reasonable personal use is acceptable. The employee is expected to exercise good judgment and act in a professional manner.

Company e-mail is not to be used for frequent or continuous personal needs, or to conduct business that is not Company-related.

Employees are expected to use good judgment and act in a professional manner in all e-mail correspondence and should always use language that is professional and reflects positively on themselves and the Company.

Information transmitted via e-mail, especially to outside parties, may not be secure and can be intercepted by third parties. Therefore, employees should exercise caution when transmitting files, messages, or any other form of electronic information. Employees should never consider electronic communications to be either private or secure.

Employees should not open e-mail attachments or click on URL links in an e-mail from senders who are unknown or suspicious without confirming the contents of the attachment with the sender.

Employees should be cautious with e-mails from trusted sources that appear out of character for the sender. In this case, Employees should contact the sender to ask about the validity of the e-mail before opening.

Employees may not use any techniques to modify the "From" line or other sender/origin information in e-mails to change, hide, or disguise their identity or send anonymous or electronic communications. Sending e-mails on behalf of someone else (e.g., an executive assistant sending an e-mail on behalf of an executive) is allowable only if it is indicated in the e-mail.

The automatic forwarding of Company e-mails to non-Company e-mail accounts (e.g. Google, Yahoo, AOL, Hotmail, etc.) is prohibited.

Use of non-Company e-mail (e.g. Google, Yahoo, AOL, Hotmail, etc.) is restricted to access over the Internet using Microsoft Internet Explorer and no such e-mail programs can be installed on Company Systems.

Employees may periodically receive unsolicited e-mails that may contain inappropriate content. In these instances, under no circumstances should the Employee forward or share an e-mail containing this type of content. Examples of content the Company may consider inappropriate include, but are not limited to: sex, drugs, hate speech, criminal skills, cults, gaming, gambling or other extreme, gross or indecent content.

E-mail messages should only be sent to recipients with a "need-to-know". Do not feel the need to "just send copies to others" unless they have a need to be copied.

Use of Company resources to access the Internet is meant primarily for business purposes. Access to the Internet for non-business purposes should be limited and cannot impact other users, individual job or system performance, or violate any other Company Policies and procedures. Utilization of Company resources for Internet access is a privilege that may be revoked at any time.

Employees will not use Systems to access, download, transmit, store or view any offensive content.

Offensive content includes, but is not limited to, sexual comments or images, racial slurs, gender specific comments or any comments that would offend someone on the basis of their age, sexual orientation, religious or political beliefs, national origin or disability.

Employees will not use Systems to publicly embarrass the Company, its employees, or to jeopardize the reputation of the Company (e.g., by transmitting libelous, slanderous, defamatory, threatening, abusive or other inappropriate messages).

Employees will not use Systems for uploading/downloading of internal or external copyrighted material which will constitute an infringement of copyright law.

Employees will not use Systems to access non-business related auctions, such as Ebay.

Office phones and mobile communication devices are primarily for business purposes, although limited personal use is acceptable. The employee is expected to exercise good judgment and act in a professional manner.

The computers and computer accounts given to employees are to assist them in the performance of their job. Private equipment is not allowed to be connected to the Local Area Network.

Employees may not permit any unauthorized person to access data contained on their computer.

All employees are responsible for protecting the security of the computers and other equipment assigned to them to ensure that they are not subject to unauthorized access or use.

Employees must ensure their computers have password protection which is maintained in accordance with the password policies and computers must not be left unattended at any time without an appropriate locking function (screensaver with password protection).

Employees should not have an expectation of privacy in anything they create, store, send, or receive on Company owned computers and Systems.

Installation or use of unapproved hardware or software is prohibited. The Company reserves the right to remove any unauthorized hardware or software without warning or notice.

All Users must change their Microsoft Windows, Local Area Network, and business applications (e.g. SAP) passwords at least once every 3 months to a case sensitive format that is at least 8 bytes long, contains at least one capital letter and contains at least one number. The Systems are be set up to auto-prompt the employee to update their password.

Employees are responsible for all transactions made using their passwords.

No employee may access a Systems using another employee's password or account.

All passwords must be promptly changed if an employee suspects that it has or might be disclosed to an unauthorized party.

Passwords are to be treated as confidential information and are not to be divulged. For example, passwords must not be written down, and should not be printed, stored online, or given to others.

The screensaver used should have password protection so that no person other than the designated employee

can restart the PC's functions.

The password should never be visible when entered.

All employees must avoid the inadvertent spread of computer viruses by following all of the Company's virus protection procedures when downloading software and data from the Internet.

The willful introduction of computer "viruses", Trojan horse or trap-door applications, messages used solely to distort or control the recipient's screen or display or other disruptive, destructive or self-replicating programs into the Company's networks or into external networks is strictly prohibited.

All employees are required to adhere to the current Company standards for software and associated software updates on the employee's Systems. This includes virus software, operating system (e.g. Microsoft Windows XP), Company provided patches, virus updates, and maintenance releases when made available.

Installation or use of unapproved hardware or software is prohibited. The Company reserves the right to remove any unauthorized hardware or software without warning or notice.

COPYRIGHT, LICENSE AND LEGAL ISSUES

The Company prohibits the unauthorized access or improper use of its Systems and/or network.

Transmission, distribution, and storage of material or other conduct in violation of Company Policy and/or the Company's Business Conduct Guidelines, or conduct found unlawful under any local, state or federal law or regulation is strictly prohibited. This shall include, but is not limited to, unauthorized use of material that is protected by copyright, trademark or other intellectual property right; material that establishes a threat, violation of export control laws or regulations or disclosure of trade secret.

Information marked "For Internal Use Only" or "Confidential", or whose contents place it on a similar level requiring special treatment, must not be given to outsiders without proper authorization. Content marked as "For Internal Use Only" or "Confidential" or similar manner is only permitted to be transmitted provided the appropriate measures have been taken to ensure that disclosure to unauthorized persons is prevented and that the integrity of the information is assured.

VIOLATION OF THIS POLICY MAY RESULT IN DISCIPLINARY ACTION UP TO AND INCLUDING TERMINATION OF EMPLOYMENT.

Advanced Armament Corp.

NEW HIRE ORIENTATION

EMPLOYEE NAME: Kevin Brittingham EMPLOYEE #: _____
 JOB TITLE President HIRE DATE: 10/3/09

Information Covered with New Employee (If Applicable)

✓ or NA

- | | |
|-------------------------------------|---------------------------------|
| <input checked="" type="checkbox"/> | Employee Number |
| <input checked="" type="checkbox"/> | Employee / ID Badge / Security |
| <input checked="" type="checkbox"/> | Drug Test |
| <input checked="" type="checkbox"/> | Physical (If Applicable) |
| <input checked="" type="checkbox"/> | I-9 Form (copies attached) |
| <input checked="" type="checkbox"/> | W-4 Forms (Federal & State) |
| <input checked="" type="checkbox"/> | HRIS Form |
| <input checked="" type="checkbox"/> | EOE Employer |
| <input checked="" type="checkbox"/> | Non-Disclosure Form |
| <input checked="" type="checkbox"/> | Emergency Contact |
| <input checked="" type="checkbox"/> | Vacation |
| <input checked="" type="checkbox"/> | Holidays |
| <input checked="" type="checkbox"/> | Payroll / Timecard / Overtime |
| <input checked="" type="checkbox"/> | Direct Deposit (if applicable) |
| <input checked="" type="checkbox"/> | Changes to Personal Information |
| <input checked="" type="checkbox"/> | Dispute Resolution |
| <input checked="" type="checkbox"/> | Performance Reviews |

- | | |
|-------------------------------------|-------------------------------------|
| <input checked="" type="checkbox"/> | Copy of Employee Reference Guide |
| <input checked="" type="checkbox"/> | Harassment Policy |
| <input checked="" type="checkbox"/> | Workplace Violence Policy |
| <input checked="" type="checkbox"/> | Drug-Free Workplace Policy |
| <input checked="" type="checkbox"/> | Computer Network User Policy |
| <input checked="" type="checkbox"/> | Attendance Policy |
| <input checked="" type="checkbox"/> | FMLA / Sick Leave / Military LOA |
| <input checked="" type="checkbox"/> | Dress Code |
| <input checked="" type="checkbox"/> | Firearms Policy – Personal Firearms |
| <input checked="" type="checkbox"/> | Safety Procedures |
| <input checked="" type="checkbox"/> | Quality Policy / Principles |

By signing this form, I am verifying the following:

1. I have received a copy of the Employee Reference Manual Guide and will read it.
2. That I am on a six (6) months new hire trial/review program.
3. That the Company may change, rescind, or add to any policies, benefits or practices described in the Employee Reference Manual from time to time and at its sole and absolute discretion with or without prior notice. I also understand that it is my responsibility to familiarize myself with those changes.
4. That all of the above information has been reviewed with me and I had an opportunity to ask questions or voice concerns.

Employee: MJ

Date: _____

10/3/09

Human Resources: _____

Date: _____

**ADVANCED ARMAMENT
CORP.**

***Acknowledgment Of Receipt
Of Employee Reference
Manual***

This is to acknowledge that I have received a copy of the Employee Reference Manual of AAC. I understand that it contains important information on the general policies of the company.

I have familiarized myself with the material in the reference manual and understand that I am governed by its contents. I further understand that AAC may change, rescind, or add to any policies, benefits, or practices described in the reference manual from time to time at its sole and absolute discretion with or without prior notice. I also understand that it is my responsibility to familiarize myself with those changes; and that a master copy of this reference manual is available in the Human Resource Department for my review at any time.

Signature

Kevin Brittingham
Print Name

10/3/09
Date